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COUNTY COUNCIL OF NOTTINGHAMSHIRE

INSTITUTE OF SOCIAL
MEDICINE

10, PARKS ROAD,
OXFORD

ANNUAL REPORT

ON THE

HEALTH AND HEALTH SERVICES
OF THE COUNTY.

FOR THE YEAR 1950.

CHRISTOPHER TIBBITS, C.B.E.,
M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. (Oxon.),
COUNTY MEDICAL OFFICER.

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County Health Committee.†

Chairman :

ALDERMAN W. BAYLISS, C.B.E.

Vice-Chairman :

COUNCILLOR J. T. PEPPER.

Ex-officio : ALDERMAN W. BAYLISS, C.B.E.
ALDERMAN L. W. A. WHITE.

Aldermen :

COOPER, G. C.
FARR, S.
HARTLAND, H.
IZZETT, P. A.
KIRK, C. C.
MARSHALL, J. A.

PERCIVAL, J. A.
SCHOFIELD, A. W.
SEVERN, J. T.
STUART, MRS. F. G.
TAYLOR, MRS. C. A.

Councillors :

AINLEY, J.
ASHWORTH, R. W. B.
BEARDSLEY, MRS. M.
BETTERIDGE, MRS. A. E.
BOWEN, MRS. D. M.
CARLTON, H. C. C.
CLARK, J. J. K.
CREWE, W.
CROCKER, H. J.
DODDS, L.
ELEY, J. W.
FOSTER, W. H.
HARRISON, C.
HAYES, F.
HILL, MRS. L.

ILETT, G.
IRELAND, W.
LIMB, MRS. A. M.
MARTIN, W.
MEAD, A.
MITCHELL, L. J.
PEPPER, J. T.
QUIBELL, MRS. K.
ROBERTS, J.
SHARRARD, MRS. B.
SMALL, F. A.
STRETTON, J. H.
TURNER, O.
WARNER, E. L.

Representative Members :

Borough Councils :

East Retford	.	PEATFIELD, J. W.
Mansfield	.	BOSWORTH, A. H.
Newark	.	CLUTTERBUCK, C.
Worksop	.	Vacancy.

Urban District Councils :

Four vacancies.

Rural District Councils :

BOOTHBY, MRS. F. K.	STEVENS, W. H.
MILLS, H.	WALTERS, J. T.

STAFF.

(Particulars of Staff as at 1st April, 1951.)

County Medical Officer—

A. C. TIBBITS, *C.B.E.*, M.R.C.S., L.R.C.P., D.P.H.

Deputy County Medical Officer—

C. W. W. JEREMIAH, M.R.C.S., L.R.C.P., D.P.H.

First Assistant County Medical Officer—

A. R. C. MARGETTS, M.R.C.S., L.R.C.P., D.P.H., D.C.H.

Second Assistant County Medical Officer —

MRS. M. B. BLACK, M.B., Ch.B., D.P.H.

Chest Physicians (employed jointly with Regional Hospital Board) —

L. W. HEARN, M.B., B.S., D.P.H.

N. W. ROBERTS, M.D., Ch.B., D.P.H.

Medical Officer for Mental Health—

Vacancy.

Assistant Medical Officers for Maternity and Child Welfare—

MISS J. A. FORBES, M.B., Ch.B., D.R.C.O.G., D.P.H.

(One Vacancy).

Fourteen Medical Practitioners also employed for Sessional duties on a Fee basis.

Assistant County Medical Officers—

MISS J. M. CUMMINS, B.A., M.B., B. Ch., B.A.O., L.M., D.P.H.

MISS E. DOUGLAS, M.B., Ch.B., D.P.H.

MISS J. KEAN, M.B., Ch.B., D.P.H.

MRS. A. TOBERT, M.B., B.S., D.C.H. (employed approx. half-time).

MRS. M. C. WOOD, M.B., B.S., M.R.C.S., L.R.C.P. (employed half-time).

J. R. LAHIFF, M.B., B.Ch., B.A.O.

(Four Vacancies).

Assistant County Medical Officers and Medical Officers of Health of County Districts—

J. S. DRUMMOND, M.B., Ch.B., D.P.H. (Mansfield Borough).

G. G. BUCHANAN, M.B., Ch.B., D.P.H. (Newark Borough, Newark Rural and Southwell Rural Districts).

J. TOLLAND, L.R.C.S., L.R.C.P., L.R.F.P.S., D.P.H. (East Retford Borough and East Retford Rural Districts).

M. B. McCANN, L.R.C.S., L.R.C.P., D.P.H. (Worksop Borough and Worksop Rural Districts).

H. D. B. NORTH, M.Sc., M.B., Ch.B., D.P.H. (Arnold and Carlton Urban Districts))

E. BEBBINGTON, M.B., Ch.B., D.P.H. (Beeston and Stapleford Urban District).

W. R. PERRY, M.B., B.S., D.P.H. (Eastwood Urban and Basford Rural Districts).

M. J. COLLINS, M.B., B.Ch., B.A.O., D.P.H. (Hucknall Urban District).
 A. B. CLARK, M.B., Ch.B., B.S., D.P.H. (Kirkby-in-Ashfield Urban District).
 B. N. EEDY, M.B., B.Ch., B.A.O., D.P.H. (Mansfield Woodhouse and Warsop Urban Districts).
 T. S. McKEAN, M.B., Ch.B., D.P.H. (Sutton-in-Ashfield Urban District).
 W. B. WATSON, L.R.C.S., L.R.C.P., L.R.F.P.S., L.D.S., D.P.H. (West Bridgford Urban and Bingham Rural Districts).

Assistant County Medical Officer and Deputy Medical Officer of Health of the Borough of Mansfield—

MISS I. CALEY, M.A., M.B., B.Ch., D.P.H.

Child Psychiatrist (provided by the Regional Hospital Board and services utilised jointly with Nottingham City Council)—
 Vacancy.

Senior Dental Officer—

D. E. MASON, L.D.S.

School Dental Officers—

MISS M. ARMITAGE, L.D.S.

R. R. MACLEAN, L.D.S.

MISS A. KAVANAGH, L.D.S.

J. M. MITCHELL, L.D.S.

MRS. I. M. KEATES, L.D.S. (Part-time)

G. R. SMITH, L.D.S.

D. F. G. CAME, L.D.S.

(Vacancies equivalent to 16½ School Dental Officers).

Sherwood Village Settlement—

Medical Superintendent—

E. FIRTH, M.B., Ch.B. (part-time)

(also employed by Regional Hospital Board as Medical Superintendent, Ransom Sanatorium).

Lay Administrative Assistant—

W. L. RICHARDSON.

Chief Clerk—

J. RENSHAW.

Deputy Chief Clerk—

E. GILLOTT.

County Health Inspectors—

G. H. EARNSHAW.

(One vacancy).

Assistant Health Education Officer—

A. H. MARROW.

Second Assistant Health Education Officer—
N S. WASS.

Senior County Almoner—
MISS B. B. STEWART.

Assistant County Almoners—
MISS S. M. CUTTS. (One vacancy).

Superintendent Health Visitors—
MISS E. BOWLER. MISS A. COLLISHAW. MRS. C. J. MCHENRY

Other Nursing Staff—
Sixty-six Health Visitors—(12 vacancies).
Two Tuberculosis Visitors—
Duties wholly connected with Tuberculosis.
Eight School Nurses—(3 vacancies).
Two Dental Nurses.
Five Dental Attendants—(17 vacancies).

Midwifery—

Senior Assistant Non-Medical Supervisor of Midwives—
MISS M. K. COLLINS.

*Junior Assistant Non-Medical Supervisor of Midwives and
Health Visitor—*
MISS R. E. HERMES.

Sixty-five County Midwives (6 vacancies).

Mental Health Service—

Mental Health Officer—
W. A. FROST.

Female Superintendent Mental Health Worker—
MRS. E. L. ANDREWS.

Mental Health Workers—
Ten Males (employed jointly as Mental Health Workers and
District Welfare Officers).
One Male (employed jointly as Assistant Mental Health Worker
and District Welfare Officer).
One Female (2 vacancies).

Instructress, Mansfield Occupation Centre—
MISS R. BARFOOT.

Home Teachers for Mentally defective persons—
MRS. H. MORRELL.
MRS. N. M. STOKES.

*Day Nurseries—**Matrons—*

Beeston—MRS. E. W. GERRING.

Carlton—MISS E. M. PIMLOTT.

Eastwood—MISS J. D. KAYE.

Harworth—MISS E. WRAY.

Mansfield (Bull Farm)—MRS. G. NEPORA.

Mansfield (Ravensdale)—MRS. C. E. PARGETER.

Newark—(Vacancy).

Stapleford—MRS. S. FLETCHER.

West Bridgford—MISS F. M. SCOTT.

*Home Help Service—**Organiser—*

MISS M. W. COTTEE.

Deputy Organiser—

MRS. K. KEAYS.

Sub-Organisers—

Seven—(2 vacancies).

Case-Workers—

Nine (One vacancy).

County Ambulance Officer—

F. E. JOLLEY.

Milk Sampling—

Two Milk Samplers.

*Speech Therapy—**Chief Speech Therapist—*

MISS M. DOLMAN.

Speech Therapists—

MISS S. J. EDWARDS.

MISS P. A. E. GRADY.

MISS C. H. M. LOGAN.

MISS S. J. SWIFT.

*Child Guidance—**Educational Psychologists—*

One whole-time.

One part-time.

Psychiatric Social Workers—

Three whole-time.

Play Therapist (part-time)—

Vacancy.

Audiometrician—

MISS M. TORRANCE.

NAMES AND ADDRESSES OF THE MEDICAL OFFICERS OF HEALTH OF THE TWENTY COUNTY DISTRICTS.

AS AT THE 1ST APRIL, 1951.

BOROUGHES AND URBAN DISTRICTS.

DISTRICT.		NAME OF THE MEDICAL OFFICER OF HEALTH.	ADDRESS.
MANSFIELD (Borough)	..	J. S. Drummond, M.B., Ch.B., D.P.H.	Public Health Department, Gilcroft Street, Mansfield.
WORKSOP (Borough)	..	M. B. McCann, L.R.C.S., L.R.C.P., D.P.H.,	Park House, Park Street, Worksop.
NEWARK (Borough)		G. G. Buchanan, M.B., Ch. B., D.P.H.	Public Health Department, The Friary, Appleton Gate, Newark.
EAST RETFORD (Borough)	..	J. Tolland, L.R.C.S., L.R.C.P., L.R.F.P.S., D.P.H.	Municipal Offices, The Square, Retford.
ARNOLD	..	H. D. B. North, M.Sc., M.B., Ch.B., D.P.H.	Council Offices, Arnot Hill House, Daybrook, Arnold.
BEESTON AND STAPLEFORD	..	E. Bebbington, M.B., Ch.B. D.P.H.	Public Health Department, The Willows, Dovecote Lane, Beeston.
CARLTON	..	H. D. B. North, M.Sc., M.B., Ch.B., D.P.H.	Public Health Department, Council House, Burton Rd., Carlton.
EASTWOOD	..	W. R. Perry, M.B., B.S., D.P.H.	Public Offices, Church Street, Eastwood.
HUCKNALL	..	M. J. Collins, M.B., B.Ch., B.A.O., D.P.H.	Council Offices, Hucknall.
KIRKBY-IN-ASHFIELD		A. B. Clark, M.B., Ch.B., B.S., D.P.H.	Council Offices, Urban Road, East Kirkby.
MANSFIELD WOODHOUSE	..	B. N. Eedy, M.B., B.Ch., B.A.O., D.P.H.	Public Health Department, Manor House, Mansfield Woodhouse.
SUTTON-IN-ASHFIELD		T. S. McKean, M.B., Ch.B., D.P.H.	Public Health Department, Forest Street, Sutton-in-Ashfield.
WARSOP	..	B. N. Eedy, M.B., B.Ch., B.A.O., D.P.H.	Health Department, Town Hall, Warsop.
WEST BRIDGFORD	..	W. B. Watson, L.R.C.S., L.R.C.P., L.R.F.P.S., L.D.S., D.P.H.	Health Department, The Hall, Bridgford Road, West Bridgford.

RURAL DISTRICTS.

BASFORD	..	W. R. Perry, M.B., B.S., D.P.H.	Health Department, Rock House, Stockhill Lane, BASFORD, Nottingham.
BINGHAM	..	W. B. Watson, L.R.C.S., L.R.C.P., L.R.F.P.S., L.D.S., D.P.H.	Council Offices, Bingham.
WORKSOP	..	M. B. McCann, L.R.C.S., L.R.C.P., D.P.H.	Council Offices, Highfield House, Carlton Road, Worksop.
EAST RETFORD	..	J. Tolland, L.R.C.S., L.R.C.P., L.R.F.P.S., D.P.H.	Municipal Offices, The Square, Retford.
NEWARK	..	G. G. Buchanan, M.B., Ch.B., D.P.H.	Public Health Department, The Friary, Appleton Gate, Newark.
SOUTHWELL	..	G. G. Buchanan, M.B., Ch.B., D.P.H.	Public Health Department, The Friary, Appleton Gate, Newark.

NOTTINGHAMSHIRE COUNTY COUNCIL.

PUBLIC HEALTH DEPARTMENT,
COUNTY HALL,
TRENT BRIDGE,
NOTTINGHAM.

NOVEMBER, 1951.

TO THE CHAIRMAN AND MEMBERS OF THE
NOTTINGHAMSHIRE COUNTY COUNCIL.

LADIES AND GENTLEMEN,

I present my Annual Report of the year 1950, the 23rd of the series of Reports which I have been privileged to submit.

Once again I have to report a continuance of the steady growth in population which has been a feature in Nottinghamshire for so many years. The estimated increase at mid-year 1950 was 10,710, giving a total population of 533,870. The population has approximately doubled since the turn of the century, and Nottinghamshire has become one of the Large Counties.

Reference to "Table IV, Abstract of Vital Statistics" in the appendix to this Report which records certain statistics over the past fifty years reveals interesting and important changes such as the reduction of the net death roll from 14.9 in 1901 to 10.4 in 1950; the reduction of the Infantile Mortality rate from the disturbing figure of 145 in 1901 to 34.5 in 1950, and the steadily falling birth rate from 31.3 in 1901 to 16.3 in 1950.

The first two reductions are reflexes of improved conditions of environment (Housing, Sanitation and mode of living); increased medical and scientific knowledge and the application thereof to the prevention, cure and eradication of disease; the steady extension of what are now called "Social Services" and the gradually improving understanding at every level of the means to a healthy life.

This fifty years includes doubtless many "bad old days" but the record is pregnant with the story of their planned and progressive elimination. The story goes on and there is still much to do but this

past gives great encouragement for the future and, surely, stands as a lasting tribute to an era of humane and ever awakening government both local and central.

Dare we hope for a further fifty years of progress at the same rate ?

Dare we hope for medico-scientific progress at the vastly accelerated rate of the past ten years ? Why not ? New fields have been opened but their exploration is barely begun.

Diphtheria has been conquered in recent times as Cholera and Plague were conquered in earlier times, by different methods. The possibility of reliable immunisation against that scourge of the very young, Whooping Cough, is drawing steadily nearer.

The sulpha drugs and anti-biotics have reduced the gravity of many diseases and enhanced their cure ; by insulin we can deal with Diabetes ; by Liver extract we have robbed Pernicious Anaemia of its dire menace. Even Tuberculosis may before long have to yield to the onslaught of modern therapy and preventive immunisation. But the picture has a " reverse " which calls for scrutiny.

Turning to page 21 we find a schedule of the principal causes of death.

Facile princeps were diseases of the Heart and Circulation ; next came Cancer and malignant diseases, third, diseases of the Nervous System of Vascular origin, and fourth, diseases of the Respiratory System (excluding Tuberculosis). Tuberculosis " also ran " as a bad fifth. Cancer mortality figures have shown small but steady increases over many years, some fraction being undoubtedly due to more accurate diagnosis.

Diseases of the Heart and Circulation, and Vascular diseases of the Nervous System though too often affecting people in middle-age, are principally the terminal diseases of old age.

Old age, however, has become much older in the past fifty years.

Grave diseases still afflict us, without much check, in sporadic or in large scale epidemic proportions, such as Acute Poliomyelitis and Virus Influenza, and there remains much to learn.

It often occurs to me to wonder whether the translation of modern modes of living, if it were possible, with their stresses, strains, rackets, speeds and intensities, back to the conditions of environment and disease-liability of fifty years ago might not have resulted in the decimation of our race.

From this thought follows the corollary that To-day has been made possible by the advances in Preventive and Applied Medicine of the Yesterdays.

In the modern idiom—That is progress—or is it ?

However that be, I am able to record a good health year for Nottinghamshire in 1950 as compared with that past and with the Country as a whole.

There was no major epidemic, the County escaping serious Virus Influenza attack.

Acute Poliomyelitis was troublesome, but the fatality was relatively low.

Infantile mortality showed a small increase from 32 to 34.5 deaths per 1,000 live births, and Maternal mortality rose from 0.55 to 1.38 deaths per 1,000 live births. There were twelve maternal deaths in the whole County, an increase of seven.

The causes of death were : 4 Pulmonary Embolism, 1 Cerebral Embolism, 2 Toxaemia, 1 Placenta Praevia, 1 Ruptured Uterus, 1 Obstetric Shock, 1 Hydronephrosis and uraemia, 1 shock from attempted abortion.

The death rate from Pulmonary Tuberculosis was the lowest ever experienced, 0.31 per 1,000 of population.

There was no case of Diphtheria during the year.

Comments on particular Health Services.

1. Environmental Services.

Water Supplies.

Some progress was made during the year towards eliminating those few remaining patches in the County lacking a mains water supply.

Schemes were approved for :

- (a) A part of the East Retford Rural District.
- (b) A part of the Newark Rural District.
- (c) A part of the Basford Rural District.
- (d) A part of the Bingham Rural District.

Sewerage and Sewage Disposal.

Schemes were approved for :

- (a) the Bestwood area of the Basford Rural District.
- (b) the Cuckney area of the Worksop Rural District.
- (c) the Trowell area of the Basford Rural District.

The tabular statement in the body of the Report records the water-supply position throughout the County and details of local extensions.

2. Preventive Health Services.

(i) *The Village Settlement.*

(a) *The Industries.*

At the beginning of the year a whole-time skilled Cabinet-Maker-Instructor was appointed to the staff of the Industries. This resulted in a rapid and most welcome improvement in the quality and finish of the products. A new pride and incentive was given to the workers as well as greatly improved training. However, the difficulties experienced in 1949 and the later post-war years owing to market changes and the difficult supply position as affecting the "Industries" brought to a head the long-discussed question of employing an expert whole-time General Manager of the Industries.

Provision was made in the estimates for such a post but it was decided to take the advice of a Business Consultant before making an appointment.

In due course a Business Consultant surveyed the position of the Industries in detail, and towards the end of the year submitted an important report to the Management Committee.

This report took into consideration all the special factors affecting an industry of this character—the disability of the men, their lack of special skill, the reduced (and variable) working hours available, and the need to avoid stress and strain by the use of machinery and the fabrication of products appropriate to the men's handicap.

The Consultant showed an understanding appreciation of these fundamental considerations and tempered his report accordingly.

Nevertheless he demonstrated that the difficulties native to such a scheme did not account sufficiently for increasing costliness of "Sherwood Industries."

He showed conclusively that constructive remedies in management and supervision should yield gradually improved results, and he accordingly recommended the appointment of a General Manager experienced in production and salesmanship on a Commercial scale as soon as possible. He also gave clear indications of the points of fault and of the manner of remedy.

On consideration of this report the decision to appoint a General Manager was reached towards the end of the year, and other recommendations by the Consultant were implemented.

As I write in 1951 it is possible to record that the appointment has been made and great advances in production both in quality and quantity have already followed. Further comment must be reserved for my Report for the year 1951.

(b) *The proposed Joint Board.*

The proposal to extend the range of service of the Village Settlement by the establishment of a Joint Board constituted of representatives of 15 of the 17 Local Health Authorities in the Sheffield Hospital Region proceeded to the point of the preparation of a detailed Instrument in draft, by a " Drafting Sub-Committee " for submission to the proposed constituent Authorities.

(c) *The price to be paid.*

It has been shown above that, though no figures are given, the cost of conducting a Village Settlement on a small scale is high and a matter for anxious consideration. How high can this cost be allowed to ascend? What is the price to be paid?

In 1950 there died one of our first Settlers. Suffering from severe chronic pulmonary Tuberculosis he was appointed in 1937, a near hopeless case.

He became a first occupant of one of our first six houses.

He gave unstinted and skilled service, and returned tenfold in gratitude and loyalty for the sheltered chance of life which the Council gave him. He lived thirteen years of useful contented life. There are others which afford near parallel.

What is the price to be paid?

(ii) *Protection of Children from Tuberculosis.*

On the recommendation of the Ministry of Health, steps were taken during the year to safeguard organised groups of children from the risks of Tuberculous infection by transmission by members of the Staff. Such groups included Residential Nurseries and Homes, Day Nurseries and special Schools, and several Committees and Departments of the Council were involved. In due course a willing co-operation by all concerned, including the several Mass Radiography Units of the Regional Hospital Board, established arrangements for the examination by X-Ray of all new candidates for appointment to the Staffs concerned, and for the systematic examination and re-examination of all Staff periodically.

(iii) *B.C.G. Vaccination.*

An amendment to the Council's Proposals under Section 28 with the object of providing for a service of B.C.G. Vaccination was approved by the Minister. Preliminary administrative steps were taken and discussions held with the appropriate Chest Physicians who would in their Preventive capacity be responsible for the clinical application of the procedure. It is already apparent that no systematic progress will be made unless additional Specialist Staff can be made available, and there is reason for hope that this provision will in due course be made.

(iv) *Vaccination against Small Pox and Immunisation against Diphtheria*

Vaccination, now completely voluntary, is steadily becoming less acceptable. Under the Vaccination Acts about one-third of the population received primary Vaccination, whereas now the proportion is about one-quarter.

During the year a novel incentive to bulk Vaccination arose which materially increased the primary Vaccinations. This was the Small Pox outbreak at Glasgow.

The connecting link was the International Football Match held at that City during the outbreak to which many hundreds of enthusiasts from Nottinghamshire decided to go. Even the scare could not stop them BUT they were Vaccinated first! Sweet are the uses of adversity.

By contrast the position of Diphtheria Immunisation is very satisfactory. 76% of the children at risk were maintained in a protected state, and not a single case of Diphtheria was notified during the year.

Constant Health Education by poster, pamphlet and by word of mouth, and sound following up by Health Visitors with co-operation by School Teachers and other staff have secured this result. Sweet are the uses of advertisement.

3. **The County Ambulance Service.**

Good progress was made in replacing the old fleet by new vehicles—2 Austin, 5 Bedford and 1 Morris Ambulances being delivered. In addition two Spurmobus sitting case vehicles were obtained. Three Austin heavy Army type Ambulances were fitted very successfully with modern Ambulance bodies locally.

The County colour was changed from ivory to a handsome Cambridge blue, with grey mudguards and radiator shell. Experience has already shown that this colour is much “hardier” and easier to keep smart. The fleet will be adapted to the new colours by easy stages.

New garage buildings were acquired at Mansfield and Southwell and plans approved for the erection of new buildings at Beeston, Carlton, Bingham, Tuxford, Misterton, Retford, Ruddington, Eastwood and Kirkby-in-Ashfield.

A scheme for the provision of Radio-Control was approved early in the year, and application for the allocation of a Frequency was made to the Postmaster General.

Intimation of such an allocation was received in October, but by the end of the year negotiations with the G.P.O. as to the type of plant to be installed had not been completed.

Reference to the appropriate chapter in the body of the Report will show how important an organisation the Ambulance Service has now become, and how great is the service it is rendering to the Public.

4. Personal Health Services.

I would call attention to the extensive reports on the Maternity and Child Welfare, Health Education and Mental Health Services.

These are services very directly affecting the individual and the reports show what a variety of aids the Council has provided for the public in the maintenance of Health, the rearing of healthy children and in alleviation of thousands of personal problems and difficulties.

A new service provided with the good co-operation of the Regional Hospital Board was the Consultant Paediatric Service, now available at weekly sessions at Nottingham, Mansfield and Worksop. This secures readily accessible specialist advice available through the Assistant Medical Staff to the Child population.

5. Housing.

This basic requirement of Health is not the direct responsibility of the County Council. Nevertheless the urgency of yet more progress in new housing comes forcibly before my Department through constant representations from Health Visitors and other Staff, and from an endless chain of letters from individual members of the public.

Reading these letters dispassionately I am left with a deep impression of hardship, over-crowding and inadequate housing. Very great progress has indeed been made by the County District Housing Authorities. Some are right in the van of progress for the whole country. Clearly there remains a vast problem, the basic problem of healthy living.

6. National Health Service.

In submitting my Annual Report for the year 1949 I included in my introductory comments, written in November 1950, a detailed review of the operation of this service as assessed on local experience.

Any further review will therefore fall to be dealt with, if necessary, in my Report on the year 1951.

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During the year the Council have lost the service of two valued officers who have given long service in the Department.

Doctor A. M. Ogilvie retired on superannuation on 31st December, 1950, having served since February, 1929, and Miss E. R. Bennett, Superintendent Health Visitor, retired on 2nd September, 1950, after 28 years' service. Both these officers gave skilled and devoted service to the people of Nottinghamshire and were loyal and faithful colleagues who earned the respect and affection of all who worked with them and all for whom they worked.

STATISTICS AND NATURAL AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres) land and inland water	.. .. .	523,843
Population (Census 1921)—(actual 378,525)	.. .. .	*377,346
Population (Census 1931)—(actual 443,930)	.. .. .	*436,542
Number of Inhabited Houses (Census 1931)—(actual 108,758)		*106,634
Number of Families or separate Occupiers (Census 1931)— (actual 111,804)	.. .. .	*109,674
Average number of persons per house (Census 1931) (actual 4.1)	.. .. .	*4.1
Population (estimated to the middle of the year)	.. .. .	533,870
Estimated increase during the year	.. .. .	10,710
Rateable Value (1st April, 1950)	.. .. .	£2,836,895
Estimated product of a penny rate (1949-50)	.. .. .	£11,154

* These figures relate to the area of the County as constituted at the 30th September 1935, and exclude the population enumerated in the areas transferred to the City of Nottingham under the Nottingham Corporation Act, 1932, which came into effect on 1st April, 1933.

VITAL STATISTICS.

The Vital Statistics for the year 1950, together with those for the previous year for comparison, are shown in tabular form on the opposite page.

The population of the County at mid-year 1950, as estimated by the Registrar General was 533,870, an increase of 10,710 on that for the previous year. It should be noted, however, that both civilians and members of the armed forces stationed in the area are included in the 1950 estimate, whereas civilians only were taken into account the previous year.

The number of deaths occurring from all causes was 5,571, compared with 5,536 in 1949. The death rate was 10.4 per thousand of the population compared with 10.6 the previous year. The rate for England and Wales was 11.6, as compared with 11.7 in 1949.

The number of live births in the County was 8,683, as compared with 9,098 in 1949. The birth rate for the County was 16.3 per thousand of the population, this being the lowest since 1941 when the figure was 16.1. The birth rate for England and Wales was 15.8 compared with 16.7 in 1949.

The infantile mortality for the County showed an increase from 32 to 34.5 per thousand live births, the rate for England and Wales as a whole declining from 32 in 1949, to 29.8 in 1950.

The number of maternal deaths in the County during 1950 was 12, as compared with 5 the previous year.

The deaths from Tuberculosis in the County during 1950 totalled 185 (164 Pulmonary and 21 Non-Pulmonary), and the death rate of 0.35 for all forms of Tuberculosis is the lowest ever recorded. The death rate of 0.31 for Pulmonary Tuberculosis is also the lowest ever recorded, the previous lowest being 0.32 in 1948. The rates for England and Wales were : Pulmonary—0.32 (0.40—1949) ; Non-Pulmonary—0.04 (0.05 in 1949) ; and all forms—0.36 (0.45—1949).

The number of deaths from Cancer increased from 847 in 1949 to 916 in 1950, the rate increasing from 1.62 in 1949 to 1.71 in 1950. The Cancer death rate for England and Wales was 1.87 in 1949 and 2.0 in 1950.

					1949.	1950.
1. Infantile Mortality.						
Rate per thousand live births—						
a.	Whole County	..	..	..	32	34.5
b.	England and Wales	..	..	..	32	29.8
2. Maternal Mortality.						
(i) Rate per thousand live births—						
a.	Whole County	..	..	..	0.55	1.38
b.	England and Wales	..	..	..	Not available	
(ii) Rate per thousand total (live <i>and</i> still) births—						
a.	Whole County	..	..	..	0.54	1.34
b.	England and Wales	..	..	..	0.98	0.86
3. Puerperal Sepsis.						
(i) Rate per thousand live births—						
a.	Whole County	..	..	..	0.11	—
b.	England and Wales	..	..	..	Not available	
(ii) Rate per thousand total (live <i>and</i> still) births—						
a.	Whole County	..	..	..	0.11	—
b.	England and Wales	..	..	..	0.11	0.03
4. General Death Rate.						
a.	Whole County	..	..	..	10.6	10.4
b.	England and Wales	..	..	..	11.7	11.6

5. **Birth Rate.**

<i>a.</i> Whole County	..	..	..	..	17.4	16.3
<i>b.</i> England and Wales	..	..	..	..	16.7	15.8

6. **Tuberculosis Mortality.**

Pulmonary—

<i>a.</i> Whole County	..	..	..	..	0.35	0.31
<i>b.</i> England and Wales	..	..	..	..	0.40	0.32

All Forms—

<i>a.</i> Whole County	..	..	..	..	0.40	0.35
<i>b.</i> England and Wales	..	..	..	..	0.45	0.36

7. **Deaths from Cancer, Malignant Disease.**

<i>a.</i> Whole County	..	..	..	..	1.62	1.71
<i>b.</i> England and Wales	..	..	..	..	1.87	2.0

The general death rate, birth rate, tuberculosis mortality rates and cancer death rate given above are per thousand of the estimated population.

The following table* gives the chief vital statistics for the years 1949 and 1950 for England and Wales (as supplied by the Registrar-General) and for the County of Nottingham for comparison.

	Birth rate per 1,000 of population.		Death Rate per 1,000 of population.		Deaths under one year per 1,000 births.	
	1949	1950	1949	1950	1949	1950
England and Wales	16.7	15.8	11.7	11.6	32	29.8
126 County Boroughs, etc. ..	18.7	17.6	12.5	12.3	37	33.8
148 Smaller Towns	18.0	16.7	11.6	11.6	30	29.4
London, Admin. County ..	18.5	17.8	12.2	11.8	29	26.3
County of Nottingham ..	17.4	16.3	10.6	10.4	32	34.5
Aggregate Urban Districts ..	17.6	16.1	10.6	10.5	34	36.4
Aggregate Rural Districts ..	16.8	16.3	10.5	10.2	29	31.2

These rates are calculated on the estimated populations supplied by the Registrar-General.

*The rates supplied by the Registrar-General for England and Wales, County Boroughs, Smaller Towns and London, are provisional figures based on Weekly and Quarterly Returns.

Births.

The number of live births registered in the County during 1950 was 8,683 as compared with 9,098 the previous year. The rate was 16.3 compared with 17.4 in 1949.

Males exceeded females by 307.

The number of illegitimate births registered during 1950 was 394 as compared with 450 the previous year.

Particulars of the number of illegitimate births registered, the rate per thousand of the population and the rate per thousand live births each year since 1942 are given in the following table.

ILLEGITIMATE BIRTHS.

Year	No. of Illegitimate Births registered	Rate per 1,000 of the population	Rate per 1,000 live Births
1942	442	0.92	51.1
1943	541	1.15	58.5
1944	629	1.32	60.8
1945	699	1.47	76.8
1946	610	1.23	61.0
1947	489	0.97	45.8
1948	480	0.92	50.6
1949	450	0.86	49.4
1950	394	0.73	45.4

Deaths.

The number of deaths registered during 1950 was 5,571 (2,956 males and 2,615 females) giving a rate of 10.4 per thousand of the estimated population compared with 10.6 for the previous year.

The corresponding rate for England and Wales for 1950 was 11.6 (1949—11.7).

Principal Causes of Death.

The chief causes of death for the whole County in order were as follows :—

Heart Disease	..	..	..	..	..	1,684
Cancer, Malignant Disease	..	..	..	..	..	916
Vascular Lesions of Nervous System	..	..	..	..	..	702
Diseases of Respiratory System (excluding Tuberculosis)						646
Tuberculosis, all forms	..	..	..	..	..	185

Deaths of Infants under One Year of Age.

The number of registered live births and of infants, legitimate and illegitimate, who died during 1950 before reaching the age of one year, was as follows :—

	No. of Registered Live Births			No. of Deaths of Infants under one year of age		
	Legitimate	Illegitimate	Total	Legitimate	Illegitimate	Total
Male ..	4,344	201	4,545	166	9	175
Female ..	3,945	193	4,138	116	9	125
TOTALS	8,289	394	8,683	282	18	300

The deaths of eighteen illegitimate infants under one year of age out of a total of 394 registered illegitimate live births gives an illegitimate infantile mortality rate of 45.7 per thousand compared with a legitimate infantile mortality rate of 34.0 per thousand arising from the death under one year of age of 282 infants out of a total of 8,289 registered legitimate live births.

The total infantile mortality rate for 1950 was 34.5 per thousand registered live births. Approximately 60% of the infant deaths occurred during the first four weeks of life.

**Table of Causes of Death of Children
Under One Year of Age.**

	NUMBER OF DEATHS			Rate per 1,000 live Births
	Urban Districts	Rural Districts	County	
Whooping Cough	6	1	7	0.8
Meningococcal Infection ..	1	1	2	0.2
Other Infective and Parasitic Diseases	2	1	3	0.3
Influenza	—	1	1	0.1
Pneumonia	28	11	39	4.5
Bronchitis	7	5	12	1.4
Other Diseases of Respi- ratory System	1	—	1	0.1
Gastritis, Enteritis and Diarrhoea	13	2	15	1.7
Congenital Malformations ..	35	9	44	5.1
Other Defined and Ill-defined Diseases	120	44	164	19.0
Accidents	7	5	12	1.4
TOTALS ..	220	80	300	34.5

Birth and Death Rates (Corrected).

To render the local crude birth and death rates comparable with the country as a whole it is necessary to correct them by the application of a factor which compensates for differences in age and sex distribution in the local population, compared with the distribution in the country as a whole. Such factors have been furnished by the Registrar-General in respect of each of the County Districts and for the aggregates of Urban Districts, and of Rural Districts.

The following table gives the crude rates for each district, the correcting factors by which the crude rates are to be multiplied, and the resultant corrected rates.

URBAN DISTRICTS	BIRTHS			DEATHS		
	Crude Rate per 1,000 of the Population	Area Compar- ability Factor	Corrected Rate per 1,000 of the Population	Crude Rate per 1,000 of the Population	Area Compar- ability Factor	Corrected Rate per 1,000 of the Population
Mansfield M.B. ..	16.3	.97	15.8	11.2	1.10	12.3
Worksop M.B. ..	17.7	1.07	18.9	9.0	1.20	10.8
Newark M.B. ..	17.6	1.01	17.8	11.9	.99	11.8
East Retford M.B.	16.6	.99	16.4	12.9	.95	12.2
Arnold	14.9	.96	14.3	10.3	1.09	11.2
Beeston & St'ford	15.9	.97	15.4	10.3	1.17	12.0
Carlton .. .	14.8	.97	14.3	10.9	1.05	11.4
Eastwood ..	18.1	1.04	18.8	10.2	1.20	12.2
Hucknall	16.0	.99	15.8	8.3	1.23	10.2
Kirkby-in-Ashfield	18.1	1.04	18.8	9.2	1.14	10.5
Mansfield W'house	17.5	1.04	18.2	9.6	1.24	11.9
Sutton-in-Ashfield	16.5	1.01	16.7	11.1	1.17	13.0
Warsop	18.1	1.01	18.3	9.1	1.26	11.5
West Bridgford ..	12.9	1.0	12.9	12.0	.82	9.8
Aggregate of Urban Districts	16.3	1.0	16.3	10.5	1.10	11.5
RURAL DISTRICTS						
Basford	16.7	1.02	17.0	10.1	1.03	10.4
Bingham	14.0	1.08	15.1	11.5	.88	10.1
Worksop	17.9	1.01	18.1	8.9	1.27	11.3
East Retford ..	14.1	1.09	15.4	9.7	.94	9.1
Newark	16.4	.96	15.7	10.3	.98	10.1
Southwell ..	16.8	1.06	17.8	10.1	1.13	11.4
Aggregate of Rural Districts	16.1	1.04	16.7	10.1	1.03	10.4

INFECTIOUS DISEASES.

The total number of cases of infectious diseases notified, other than Tuberculosis, and the deaths resulting amongst the County civilian population during the year were as follows :—

DISEASE				Cases Notified	Deaths
Diphtheria	..	..	..	Nil	Nil
Scarlet Fever	..	..	..	880	*
Whooping Cough	..	..	..	1,885	8
Measles	..	..	..	4,401	1
Acute Pneumonia	..	..	..	227	*
Meningococcal Infection	..	..	..	7	2
Acute Poliomyelitis—Paralytic	..	..	40	59	5
Non-paralytic	..	..	19		
Acute Polioencephalitis—Infective	..	..	3		
Post-infectious	..	..	4		
Dysentery	..	..	..	78	*
Ophthalmia Neonatorum	..	..	..	8	—
Puerperal Pyrexia	..	..	..	22	*
Paratyphoid Fevers	..	..	..	3	—
Enteric or Typhoid Fever	..	..	..	2	
Food Poisoning	..	..	..	40	*
Erysipelas	..	..	..	71	*
Malaria	..	..	..	1	*
Infective Hepatitis	..	..	..	1	*

* Deaths from these diseases are not shown separately in the return received from the Registrar-General.

Wherever a copy of an infectious disease notification submitted in accordance with statutory requirements (*i.e.*, as soon as the Medical Practitioner became aware of the condition) was passed to the County Council within 12-48 hours of receipt by a County District Council the fee paid to the general medical practitioner was reimbursed to the Local Authority.

In all such cases the Council's Health Visitors were provided with full particulars in order to facilitate preventive action.

Acute Poliomyelitis.**Acute Polioencephalitis.**

During 1950 there occurred a further serious country-wide outbreak of these diseases—popularly known as Infantile Paralysis—the distribution of cases and deaths within the Council's area and the comparison with the previous outbreaks in 1947 and 1949 being as set out in the following table :—

COUNTY DISTRICT	No. of Cases			No. of Deaths		
	1947	1949	1950	1947	1949	1950
Urban Districts—						
Mansfield (Borough) ..	7	3	3	1	1	—
Worksop (Borough) ..	9	23	5	—	3	—
Newark (Borough) ..	7	2	2	—	1	—
East Retford (Borough)	1	—	—	1	—	—
Arnold	1	—	3	—	—	—
Beeston and Stapleford ..	5	18	3	1	2	—
Carlton	1	1	3	—	—	—
Eastwood	4	—	1	—	—	—
Hucknall	4	—	5	1	—	—
Kirkby-in-Ashfield ..	1	—	1	—	—	—
Mansfield Woodhouse ..	—	2	—	—	—	—
Sutton-in-Ashfield ..	3	—	7	—	—	—
Warsop	—	—	—	—	—	—
West Bridgford	4	5	7	1	2	1
Rural Districts—						
Basford	7	12	8	2	—	1
Bingham	5	3	4	—	—	1
East Retford	1	1	2	—	—	—
Newark	5	3	6	—	1	1
Southwell	2	6	5	1	2	1
Worksop	6	2	1	2	—	—
WHOLE COUNTY ..	73	81*	66	10	12	5

*Including 1 non-civilian.

The onset was in mid-June (some six weeks earlier than in the two previous outbreaks) and notifications again reached their peak about mid-September. As in 1949, the decline in notifications was gradual and it was not until the end of the year that the County was generally regarded as free from cases.

The age incidence of the cases notified during 1950 was as follows :

Age range	Under 1 yr.	1-4 years	5-14 years	15-24 years	25-34 years	35-49 years	50-59 years	60 yrs. and over	Total
No. of Cases	3	13	26	12	7	3	1	1	66
Incidence	4.5%	20%	39.5%	18%	10.5%	4.5%	1.5%	1.5%	100%

As in previous outbreaks, full co-operation was maintained by the County Health Department with the Medical Officers of Health of the County Districts, and where necessary with the appropriate Officers of the Regional Hospital Board, in ensuring that sufferers received prompt treatment, and in such action as was requisite and possible to prevent the spread of infection. In this connection it was arranged that operations on children for the removal of tonsils and adenoids were postponed from July to October at one hospital in the eastern half of the County and immunisation against diphtheria was discontinued for a short period in two County Districts.

SANITARY CIRCUMSTANCES OF THE AREA.

Prevention of Pollution of Rivers and Streams.

Industrial Pollution.

At Rufford Colliery there was, during the early part of the year, pollution to the stream by slurry waste caused by the disintegration of the banks of the old lagoons. Two new settling areas had been brought into use for the treatment of the waste and by the end of the year good work had been done on cleaning up the unsatisfactory conditions which existed between the old lagoons and the stream. An excavator had lowered the pitch of the banks and, to some extent, they had been covered with earth. A new collecting channel had been made along the foot of the lagoons as a safeguard against the movement of slurry deposit which might result from disintegration. The field below, on to which slurry had overflowed, had been cleaned up and some of the deposit had been taken out of the stream.

At Thoresby Colliery, in addition to the use of settling tanks for part of the slurry waste, there are lagoons formed below the tip into which some waste is discharged for settlement. The banks of the lagoons are made of slurry deposit and are near the open dyke which connects with the River Maun. Experience has shown that banks so formed are very liable to disintegration by variable weather conditions and there is a danger of pollution should any serious break-away of the banks occur. A request was made for the piping-in of the length of open effluent dyke alongside the bank of the lagoons and this work has now been completed.

The Trent Fishery Board complained of pollution to the River Leen by slurry waste from Cinderhill Colliery. Upon investigation it was suggested that a substantial barrier at the outlet end of the pond would provide adequate room for settlement especially as it was intended that no further slurry waste would pass to this area. The barrier has been built and the results, so far, are satisfactory.

Below Moorgreen Colliery tipping area slurry waste deposit was found in the Beggarlee Brook and was the result of an obstruction in a section of the rising main. To prevent further pollution a temporary lagoon was constructed by the side of the tip. This proved effective and no further evidence of pollution was observed. The rising main was cleared and conditions became normal.

At Warsop Main Colliery slurry waste deposit was seen in the dyke below the final ponds which were found to be full of solid matter. Representations resulted in mechanical means being employed and conditions were soon satisfactory.

During the year complaints were received from the Doncaster Branch of the National Farmers' Union, through the Trent Fishery Board, and from the County Surveyor, of pollution from Harworth Colliery. The dewatering of the lagoons, dealing with waste from the water tower, was one source of pollution. An endeavour has been made to reduce the amount of waste passing to the lagoons and greater care is being exercised in the discharge of top water. A second source of pollution was from waste intermittently discharged from the rotary filter. Three substantial barriers have been constructed to form lagoons and this point should now be under adequate control. Generally the plant at this pit is a good one but, as at other collieries, production has been so increased that the clarification units are overburdened. The need for an extension has, it is understood, been reported to Area Headquarters.

The conditions at Pye Hill Colliery have been unsatisfactory for some time and representations have been made to the Area General Manager asking for his immediate co-operation to bring about an improved state of affairs and an assurance has been received that the matter will be fully investigated.

At New Ollerton Colliery part of the high bank of a lagoon is made out of slurry waste deposit and there is a possibility of disintegration resulting in pollution. A request has been made for the piping-in of the stream alongside this bank and, it is understood, the matter is under consideration.

At Bentinck Colliery the slurry waste is pumped from a collecting tank to the tip where hollows have been formed. Towards the end of the year there were overflows to the river owing to a substantial increase in the amount of waste matter to be dealt with. The suggestion to keep the pump working a twenty-four hour day until a duplicate, or larger, pump could be installed was agreed to with satisfactory results.

With respect to the two Beet Sugar Works in the County, the final effluents taken from the Colwick Factory showed the desirability of some further degree of purification. It is understood that, owing to difficulties in the process, it was not possible to return the pulp press water for retreatment and as this is discharged to the general settling ponds it is reflected in the quality of the final effluents. Special piping is gradually being fitted in the Factory and it is hoped that, in due course it will be possible to re-use the pulp press waters.

At the Kelham Factory substantial quantities of deposited material were excavated from the settling ponds and used to increase the height of the banks around the ponds. Dividing walls, with penstock outlet controls, were also constructed.

Sewerage and Sewage Disposal.

Ministry of Health Inquiries.

During the year three Ministry of Health Inquiries have been held into applications by local authorities for sanction to raise loans for the construction of sewerage and sewage disposal works at a total estimated expenditure of £486,311.

The following are the details in brief :—

AUTHORITY.	Amount	Purpose of Loan
	£	
Sutton-in-Ashfield Urban District Council. Parish of Skegby ..	108,500	Sewerage and Sewage Disposal
Worksop Rural District Council. Parish of Blyth	28,050	do.
East Retford Rural District Council. Parishes of Misterton, West Stockwith, Walkeringham and Beckingham	135,210	do.
Parishes of Everton and Mattersey	52,750	do.
Parishes of Hayton and Clarbrough	32,386	do.
Parishes of North and South Leverton	32,525	do.
Parishes of East Markham and Tuxford	62,800	do.
Parishes of Ranskill and Torworth	34,090	do.

New Sewage Works.

The construction of a new sewage works for the sewage and trades waste from the Pleasley Vale Mills has been completed. The plant consists of upward flow tanks, percolating filters, humus tanks and sludge drying beds. The trades waste is neutralised before discharge to the pumping sump at the sewage works.

At the Staythorpe Generating Station a sewage works, consisting of sedimentation tanks, percolating filters and humus tanks has been installed. The sewage is pumped from two points on the site to the tanks and the capacity of the plant has been designed to cope with the whole of the flow to be received when the building of the Station is completed. Also, in connection with the erection of thirteen houses in the village of Staythorpe built by the Electricity Board to house staff personnel, a small sewage works has been put down consisting of a settling tank, percolating filter, humus tank and sludge drying bed.

Thurgarton Priory, in the Southwell Rural District, is now owned by a firm of manufacturing chemists and is being run as an agricultural research station. The alterations necessitated the provision of a new purification plant and a settling tank, percolating filter, humus tank and sludge drying bed to deal with the sewage and other waste waters.

In the Southwell Rural District separate sewage purification plants have been installed for housing schemes at Sutton-on-Trent, Walesby and Gunthorpe.

In connection with the erection of pit-head baths at Cossall Colliery a tank and filter have been put down for the treatment of the waste waters.

Alterations and Maintenance.

Provision has been made at the existing sewage works of the Harlow Wood Hospital for the sewage to be received from the Portland Training College. An additional unit has been added to each section of the plant and the extensions have been completed.

In the Basford Rural District, the main sewer from Westwood to Jacksdale sewage pumping station was so affected by colliery subsidence in 1947 that it was no longer possible for the sewage to gravitate to the pumping station and it was discharging to the stream where gross pollution took place. The District Council have now constructed a pumping station to lift the sewage to Jacksdale pumping station for treatment at the Bagthorpe Sewage Works. One pump is at work and a duplicate is being fitted.

Sewerage Schemes.

In the Basford Rural District the construction of the main sewers and sewage pumping station in connection with the sewerage scheme for the Parish of Trowell has been completed and the sewage is now lifted to the Ilkeston Sewage Works for treatment. Also, in connection with the sewerage scheme for the Parish of Bestwood the construction of the main sewers has been completed. The sewage works previously dealing with the sewage from the Colliery property and pit head baths has been abandoned, the sewage being connected to the new sewer which delivers into the Nottingham City's drainage system.

In the Southwell Rural District the sewage and waste waters from the pit head baths at Thoresby Colliery have been connected to the Edwinstowe Sewage Works.

Sampling of Effluents.

Periodical sampling of final effluents from the various sewage works in the County was undertaken as regularly as possible and, of the 151 tested, 103 were classified as 'good' or 'fair' and 48 as 'unsatisfactory' or 'bad.'

In addition to the sampling of final effluents taken and reported upon officially, 28 observation samples have been tested. These were taken mainly from the various units of sewage purification plants, and examined for the information and guidance of Engineers and Surveyors with a view to assisting them in the control of their works.

Statistics.*Analysis of Samples.*

Summary of analyses of samples examined in the County Laboratory during 1950 :—

Sewage Disposal Works :—

Good effluents	..	..	..	63
Fair effluents	..	..	..	40
Unsatisfactory effluents	..	..	..	12
Bad effluents	..	..	..	36
				151

Others :—

Manufactory effluents	..	..	..	6
Untreated sewage discharge	..	..	..	1
Observation samples	..	..	..	28
				35
				186

Visits of Inspection.

The number of visits paid during the year was as follows :—

Sewage Disposal Works	..	..	..	366
Untreated Sewage Discharges	..	..	..	16
Industrial Works	..	..	..	496
				878

Work undertaken by the County Health Inspector.**Summary of Inspections.**

	<i>No. of Visits paid</i>
Investigations in connection with public water supplies	44
Investigation of complaints of sanitary defects received from Health Visitors, County Residents, etc.	117
Investigation of Sanitary Circumstances generally (including interviews with Officers of County Districts)	483

Dairies and Cowsheds.

<i>No. Inspected</i>	<i>Satisfactory</i>	<i>Fairly Satisfactory</i>	<i>Unsatisfactory</i>
94	31	33	30

Rural Housing Survey.

Three of the six Rural District Councils have completed the survey of working-class houses within their areas. (Term "working-class" abandoned by Housing Act 1949).

In other cases progress has been rather slow. Whilst realising to the full the many calls made upon those responsible for bringing the survey to a state of completion it is suspected that some feeling of frustration may be in part responsible for the whole county survey remaining incomplete.

The value of the survey is undeniable as any scheme of reconditioning would require to be preceded by an assessment of conditions as they exist. It would be regrettable if the survey were "written off" at an interim stage.

Public Cleansing.

Great interest appears to have been shown during recent years in this subject.

The refuse dump as such has almost completely given way to the properly planned and organised area of controlled tipping with men employed full-time at the tip face.

In many cases too the collection vehicles are being replaced by new ones that may properly be described as the very last word in collection vehicles.

The following improvements were effected during the year :—

Worksop Borough ..	Service extended to 170 new premises. One new 13 cubic yard side loading vehicle put into operation.
Arnold Urban District	New 10 cubic yard vehicle put into service.
Beeston & Stapleford Urban District ..	One movable floor rear loading vehicle put into service.
Carlton Urban District	New tip with anticipated life of 15-20 years brought into use.
Eastwood Urban District	One new 10 cubic yard vehicle brought into use. The filling-up of clay quarry holes is proceeding satisfactorily, and this will enable the land to be re-used for agricultural purposes on completion of tipping.
Kirkby-in-Ashfield Urban District ..	A complete re-organisation of the Cleansing Department took place during the year. Four old side loading vehicles were replaced by two rear loading vehicles. A new tipping site was acquired.
Sutton-in-Ashfield Urban District ..	Two hundred and eighty-seven pail closets were converted to the water-carriage system.
Basford Rural District	Twenty-nine privy and pail closets were converted to the water-carriage system. Sixty-seven and a half tons of waste material, including 61 tons of mixed paper, were salvaged during the year.
Newark Rural District	Collection by contract discontinued. Council now provide a regular collection by direct labour.
Southwell Rural District	In six Parishes the work of collecting refuse was taken over by direct labour from 1st April, having previously been carried out by contract.

WATER SUPPLIES.

DISTRICT.	PARTICULARS OF SUPPLIES FROM WATERWORKS.										Proportion of houses and population connected to public mains.	Particulars of extensions of water mains.
	Quality.	Quantity.	RESULTS OF BACTERIOLOGICAL EXAMINATIONS.						Plumbo-solvency	Action taken in respect of any form of contamination.		
			Raw Water :		Water after treatment :		Results of Chemical Analyses :					
			Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory				
URBAN DISTRICTS:												
MANSFIELD (Borough) ..	Satisfactory	Satisfactory	—	—	12	—	12	—	Satis- factory	None required	Houses — 99.5% Population — 99.5%	None
NEWARK (Borough) ..	Do.	Do.	1	Nil	4	Nil	Nil	Nil	Do.	—	Houses and Population—100%	None
EAST RETFORD (Borough)	Do.	Do.	51	Nil	54	1	Nil	Nil	Do.	—	Houses — 99.9% Population — 99.9%	715 yards of 4" and 6" pipe to new housing schemes
WORKSOP (Borough) ..	Do.	Do.	14	—	4	—	2	—	Do.	Chlorination as a precautionary measure	Houses—96% Population — 96%	168 yards of 10" pipe 787 yards of 4" pipe 122 yards of 3" pipe
ARNOLD ..	Do.	Do.	1	1	4	—	5	1	Do.	Well serving two cottages closed	Houses and Population—99.9%	Branch mains on new housing estates
BREESTON & STAPLEFORD	Do.	Do.	2	—	7	—	3	—	Do.	—	100% with the exception of a few isolated properties	To new properties only.
CARLTON ..	Do	Do.	—	—	—	—	—	—	Do.	Advice re treatment of water from shallow well	Houses and Population—99.9%	3" main 113yds. 4" " 267 " 6" " 778 ,
EASTWOOD ..	Do.	Do.	—	—	—	—	—	—	Do.	—	Houses and Population—nearly 100%	To Church View Housing Estate

KIRKBY-IN-ASHFIELD ..	Do.	Unsat- isfactory	3	—	3	—	Do.	None	Houses—99.9% Population—99.9%	Total of 325 yds. to Holly Grove, Cedar Avenue, Thorneywood Rd., Northwode and Langton Colliery Baths
MANSFIELD WOODHOUSE ..	Do.	Satisfactory	—	1	4	—	Do.	Advice to users of the unsatisfactory water	Houses—99.9% Population—99.7%	Extensions to Cox's Lane Housing Scheme 620 yds. 3" main 250 yds. 4" main
SUTTON-IN-ASHFIELD ..	Do.	Insufficient for present population and industries.	—	—	34	Nil	Do	None required	Houses and Population—99.1%	Extensions to new housing schemes
WARSON ..	Do.	Satisfactory	10	1	8	Nil	Do.	Use of one deep well discontinued	Houses—98.8% Population—99.5%	400 yds. of 3" mains at Leeming Lane
WEST BRIDGFORD ..	Do.	Do.	—	—	—	—	Do.	None	Houses and Population—99.9%	To new houses
RURAL DISTRICTS:										
BASFORD ..	Do. (excepting Parish of Willoughby-on-the-Wolds†)	Do.	5	11	26	1	Do.	Notices served to eliminate causes of pollution or to con- nect to public mains	Houses—96.5% Population—94%	Mains laid to Kingston - on - Soar, Ratcliffe- on-Soar, Thorpe - in - the - Glebe, West Leake and Wysall
BINGHAM ..	* Satisfactory	* Satisfactory	† 12	† 34	† 4	—	Do.	Wells relined, cleaned and repaired. Users advised to chlorinate water before use	Houses—59% Population—55%	Extension to Flawborough started during year

* The supply from public water mains has been satisfactory, the wells have been unsatisfactory in quality and quantity.
† Supplies taken from wells.

WATER SUPPLIES—continued.

PARTICULARS OF SUPPLIES FROM WATERWORKS.													Proportion of houses and population connected to public mains.	Particulars of extensions of water mains.
DISTRICT.	Quality.	Quantity.	RESULTS OF BACTERIOLOGICAL EXAMINATIONS.						Plumbosolvency	Action taken in respect of any form of contamination.				
			Raw Water:		Water after treatment:		Results of Chemical Analyses:							
			Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory						
NEWARK	..	Satisfactory	Periodical deficiency in pressure in parts of North and South Collingham and Langford	2	—	—	—	—	—	Satisfactory	None	Not known	Northern parishes mains extension was completed by laying of water main in Barnby-in-the-Willows	
EAST RETFORD	..	Do.	Satisfactory	7	Nil	51	Nil	1	Nil	Do	None	Houses and Population — 87%	4,630 yards of 3" main from Misson village to Misson Springs 840 yards of 3" main, Welham Corner to Leverton Road New 750,000 gallonreinforced concrete reservoir completed New vacuum solution feed chlorinator put into operation	
SOUTHWELL	..	Do.	Do.	—	—	15	Nil	—	—	Do.	None	Houses and Population — 94%	Mains supply provided at Rice Hill, Kirton. Extensions to new housing schemes	
WORKSOP	..	Do.	Do.	5	—	33	—	6	—	Do.	None	Houses—94% Population—96.3%	727 yards of 3" main to new houses 256 yards of 4" main to new factory	

INSPECTION AND SUPERVISION OF FOOD.

The Milk Supply.

Supervision by District Authorities.

The records of the inspections carried out during 1950, which have been furnished by District Medical Officers of Health, are as follows :—

District.	No. on Register at end of year.		No. of Inspections.		No. of Defects found.		No. of Defects remedied.	
	Distri- butors	Dairies	Distri- butors	Dairies	Distri- butors	Dairies	Distri- butors	Dairies
<i>Boroughs—</i>								
Mansfield ..	19	7	—	93	—	1	—	3
Worksop ..	26	14	119	37	—	—	—	—
Newark ..	10	3	41	41	—	—	—	—
East Retford	3	1	—	18	—	—	—	—
<i>Urban</i>								
<i>Districts—</i>								
Arnold ..	34	10	111		5	6	5	6
Beeston and Stapleford ..	23	11	27	39	—	—	—	—
Carlton ..	57	16	17		2		—	2
Eastwood ..	3	3	6	9	—	—	—	—
Hucknall ..	27	5	58	48	—	—	—	—
Kirkby-in- Ashfield ..	21	4	—	29	—	3	—	3
Mansfield Woodhouse	42	3	67	15	—	1	—	1
Sutton-in- Ashfield ..	67	15	184	52	12	8	12	8
Warsop ..	5	4	61	12	—	—	—	—
W. Bridgford ..	27	9	—	86	—	—	—	—
<i>Rural</i>								
<i>Districts—</i>								
Basford ..	161	368	—	64	—	2	—	2
Bingham ..	60	3	41		8		8	
Worksop ..	11	2	31	9	—	—	—	—
East Retford ..	9	1	2	3	—	—	—	—
Newark ..	6	—	4	—	—	—	—	—
Southwell ..	102	80	14	5	3	3	2	2

ROUTINE MILK SAMPLING.

Type of Sample.	By whom collected.	No. of farms involved.	No. of cows involved.	No. of Samples submitted for biological examination.	RESULT OF BIOLOGICAL EXAMINATION.		
					Positive.	Negative.	Not Tested.
Mixed herd (non-graded herd)	County Milk Samplers ..	2,347	21,594	750	44	669	37
School Milks	County Health Inspector	—	—	83	1	77	5
TOTALS		2,347	21,594	833	45	746	42

Milk (Special Designations) (Pasteurised and Sterilised Milk) Regulations, 1949.

Milk (Special Designations) (Raw Milk) Regulations, 1949.

The Chief Inspector of the County Food and Drugs Department has kindly provided the following information relating to Dealers' Licences in operation at 31st December, 1950, under the above Regulations :—

Pasteurised Milk—Licensed Processors	..	13
Sterilised Milk	do.	1

According to information provided by County District Councils, the number of Licences in operation at the end of the year for the sale of graded milks was as follows :—

Pasteurised Milk	..	..	..	290
Sterilised Milk	..	..	..	343
Tuberculin Tested Milk	..	..	..	171
Accredited Milk	..	..	..	3

School Milk.

The number of School Milk samples taken on School premises during the year by the County Health Inspector and submitted for biological examination for the presence of tubercle bacillus was as follows :—

No. of Samples.	RESULT OF BIOLOGICAL EXAMINATION.				
	Positive.		Negative.		Not Tested.
	No.	Percentage.	No.	Percentage.	
83	1	1.2	77	92.4	5

With the exception of one village school in a somewhat isolated position, all schools are supplied with pasteurised milk. The use of one-third pint bottles is now general practice.

In the one instance the milk is supplied by a local producer and is heated to boiling point by the school mistress before consumption.

As a check on the efficiency of pasteurisation and upon the hygiene of the dairy, *e.g.*, cleanliness of bottles, etc., at least two samples from each supplier are taken during the year.

Of the 25 dairies supplying milk under the scheme only 8 employ the Holder system of pasteurisation. The remaining 17 dairies have installed H.T.S.T. plants indicating a progressive outlook by the dairy industry in and around the County.

Food and Drugs Act, 1938.

The adulteration of food is dealt with by the County Food and Drugs Department and, by the courtesy of the Chief Inspector (Mr. Gregory) a summary of the work carried out during the year is given below.

ARTICLE	Obtained	Tested by Inspectors	Analysed by Public Analyst	Genuine	Adulter- ated or Sub- standard
Beverages	37		37	37	
Butter and Margarine ..	14		14	14	
Cakes and Pastries ..	42		42	42	
Cake Flour and Mixtures	19		19	17	2
Condiments, Pickles and Sauces	99		99	95	4
Cooking Oils and Fats ..	16		16	15	1
Cordials and Minerals ..	18		18	17	1
Dried Fruit	16		16	16	
Drugs--various ..	41		41	41	
Fish Products	37		37	35	2
Fruit and Vegetables (Canned)	26		26	24	2
Herbs and Stuffings ..	14		14	14	
Ice Cream	149	81	68	64	4
Jams and Preserves ..	36		36	36	
Meat Products	78		78	73	5
Milk Formal	984	942	42	10	32
Milk, Informal	2,370	2,370			
Milk (Supervised Milking)	23	1	22	18	4
Milk, Condensed ..	14		14	14	
Miscellaneous Foods ..	22		22	22	
Puddings and Pudding Mixtures	23		23	23	
Sweets	24		24	22	2
Table Jellies & Powders	47		47	44	3
Wines and Spirits ..	41		41	40	1
TOTALS ..	4,190	3,394	796	733	63

Inspection of Meat and Other Foods.

In accordance with the Livestock (Restriction on Slaughtering) Order, 1940, the slaughtering of animals for human consumption continued during 1950 to be centralised under the control of the Ministry of Food at requisitioned Slaughter Houses at Nottingham, Mansfield, Newark and East Retford so that the only inspection of Slaughter Houses and of carcasses carried out in other Sanitary Districts was in connection with the slaughtering of privately owned pigs. All Sanitary Inspectors employed by the appropriate District Councils assisted, however, in the inspection of carcasses at the Slaughter Houses used by the Ministry of Food and particulars of carcasses inspected and condemned by these Officers as reported by Medical Officers of Health of the County Districts are as follows :—

	Cattle (excluding Cows)	Cows	Calves	Sheep and Lambs	Pigs
Number killed	*13,592		9,207	36,928	10,759
Number inspected	*13,592		9,207	36,928	10,759
<i>All diseases except Tuberculosis</i> Whole carcasses condemned ..	*83		165	194	76
Carcasses of which some part or organ was condemned	*3,695		43	942	408
Percentage of the number in- spected affected with disease other than Tuberculosis ..	27.8%		2.2%	3.07%	4.5%
<i>Tuberculosis only</i> Whole carcasses condemned ..	*311		54	—	37
Carcasses of which some part or organ was condemned ..	*2,979		58	—	495
Percentage of the number in- spected affected with Tuber- culosis	24.2%		1.2%	—	4.9%

*Separate figures not available in all County Districts,

The above inspections necessitated 3,864 visits to slaughterhouses. Three thousand and forty-five visits were also paid to premises where meat was on retail sale.

The total weight of meat condemned as a result of these inspections and visits was 35,868 stones.

Unsatisfactory conditions were recorded in 119 instances, and in 103 cases the necessary remedial work had been carried out by the end of the year.

Food Poisoning Outbreaks.

Twenty-one outbreaks were reported during the year, the details being as follows :—

No. of Outbreaks	No. of Cases	No. of Deaths	Organism or Other Agent responsible		Food involved	
			Organism	No. of Outbreaks	Food	No. of Outbreaks
21	40	None	Salmonella Typhimurium	7	?Artificial Cream	1
					Crab	1
			Staphylococci	1	?Tripe	1
			Unknown	13	Pork	
					Sausage	1
					?Sweets	1
					Hazlets	2
					Corned Beef	1
					Duck Eggs	2
					Trifle	1
					Brawn	1
					Meat	1
					Choc. Cream	1
					Unknown	7

Clean Food Campaigns.

Byelaws made under Section 15 of the Food and Drugs Act, 1938, became operative in seven County Districts during the year.

Clean Food Guilds have been formed in several districts, and there have been lectures and film shows for food traders and the general public.

There have been many special visits to food preparing premises, and the food manufacturers and traders have acted upon suggestions for improving the sanitary condition of their premises.

NURSING HOMES.

No applications in respect of the registration of additional premises were received during 1950. The Keeper of one of the existing Nursing Homes intimated that she wished to vary her approved accommodation from five maternity cases to three maternity and two other cases and this was authorised; the approved accommodation of another Home was varied from twelve maternity cases to five maternity and three other cases. The accommodation of another Home was increased from eight maternity cases to three maternity and seven other cases.

The Nursing Home at 24 Caledonian Road, Retford, registered for two chronic cases, was sold in March, 1950, and the registration cancelled.

There were nine Nursing Homes registered at the end of 1950, and these provided accommodation for thirty-five maternity cases and fifty-six other cases. The Inspectors made forty-three visits of inspection during the year.

CLINICS AND TREATMENT CENTRES.

The table which follows shows the various Clinics and Centres in operation in the County, and the figures shown opposite each place indicate the number of sessions held under each heading per month of four weeks.

SITUATION OF CLINIC OR CENTRE	Maternity and Child Welfare	Ante- Natal	Post- Natal	School Clinic	Dental
Arnold (3 M. C. W. Centres) ..	16	6	2	8	—
Awsworth	2	2	—	—	—
Balderton	4	1	—	4	—
Barnby Moor	2	1	—	—	—
Beauvale	4	2	—	—	—
(a) Beeston (and Stapleford) ..	12	8	—	8	8
Bestwood	2	1	—	—	—
Bilsthorpe	4	2	—	8	4
Bingham	4	1	—	—	—
Blidworth	4	2	—	—	—
Blyth	2	1	—	—	—
Bunny	2	1	—	—	—
Burton Joyce	2	1	—	—	—
Calverton	2	2	—	—	—
Carlton	16	12	1	12	8
Chilwell (Beeston)	2	2	—	—	—
Clipstone	4	2	—	8	—
Collingham	2	1	—	—	—
Cotgrave	2	1	—	—	—
Cropwell Bishop	2	1	—	—	—
Cuckney	2	1	—	—	—
Dunham-on-Trent	2	1	—	—	—
East Bridgford	2	1	—	—	—
East Leake	2	2	—	4	—
East Retford	12	4	—	8	8
Eastwood	4	4	—	8	8
Edwinstowe	4	2	—	—	—
Farndon	2	1	—	—	—
Flintham	2	1	—	—	—
Gotham	2	1	—	—	—
Gringley-on-the-Hill	2	1	—	—	—
Harworth	8	4	—	8	8
Hickling	2	1	—	—	—
Hucknall	12	6	1	12	8
Huthwaite (Sutton-in-Ashfield) ..	4	2	—	—	2
Kilvington	2	1	—	—	—
Kimberley	4	4	—	8	—
Kirkby-in-Ashfield	8	4	—	8	8
Lambley	2	1	—	—	—
Langar	2	2	—	—	—
Langold	4	2	—	8	—
Lowdham	4	1	—	—	—
(b) Mansfield (4 M. C. W. and Ante-Natal Centres, 2 School Clinics)	28	16	—	20	42
Mansfield Woodhouse (2 M. C. W. and Ante-Natal Clinics) ..	12	4	—	8	—

(a) Ultra-Violet Light Treatment—16 Sessions per month.

(b) Ultra-Violet Light Treatment— 8 Sessions per month.

CLINICS AND TREATMENT CENTRES—continued.

SITUATION OF CLINIC OR CENTRE	Maternity and Child Welfare	Ante- Natal	Post- Natal	School Clinic	Dental
Mattersey	2	1	—	—	—
Misson	2	1	—	—	—
Misterton	4	2	—	—	—
Newark	8	2	—	12	8
Newstead	6	2	—	—	—
North Muskham	2	1	—	—	—
Nuthall	2	1	—	—	—
Ollerton	8	4	—	8	8
Papplewick	2	1	—	—	—
Plumtree	2	1	—	—	—
Porchester	8	3	—	—	—
Radcliffe-on-Trent	2	1	—	4	—
Rainworth	2	1	—	—	—
Ruddington	2	2	—	—	—
Selston	2	2	—	8	—
Skegby and Stanton Hill (Sutton- in-Ashfield)	4	4	1	—	—
South Clifton	2	1	—	—	—
South Leverton	2	1	—	—	—
Southwell	4	1	—	4	4
Standhill Road (Carlton)	4	2	—	—	—
Stapleford (and Beeston)	8	2	—	8	8
Sutton Bonnington	2	2	—	—	—
Sutton-in-Ashfield	8	8	1	12	16
Sutton-on-Trent	2	1	—	—	—
Syerston	2	1	—	—	—
Trowell	2	1	—	—	—
Tuxford	4	2	—	—	—
Underwood	2	1	—	—	—
Upper Broughton	2	1	—	—	—
Warsop (3 M. C. W. Centres)	12	4	—	8	—
West Bridgford	12	4	1	8	8
Westwood	2	2	—	—	—
Willoughby	2	1	—	—	—
Worksop (4 M. C. W. Centres)	14	6	2	8	8

All Centres and Clinics are equipped for vaccination or immunisation and this is carried out at special sessions arranged according to need or at the request of a parent at a routine session.

SERVICES PROVIDED UNDER THE NATIONAL HEALTH SERVICE ACT, 1946.

HEALTH CENTRES. (Section 21).

There is still no sign of any alleviation of the conditions of stringency which have hitherto hampered the development of Health Centres, and in consequence there is little progress to report in this connection during the year 1950.

Further discussions have been held with the staff of the County Director of Planning as regards reservation of sites in the localities tentatively approved by the County Health Committee for the erection of Health Centres, and site plans have been prepared and submitted

to the County Director of Planning with a view to the provisional designation of sites in certain areas. The County Director of Planning has also been asked to reserve sites in connection with projected developments at (i) Sutton-in-Ashfield, and (ii) Newstead and Fishpool.

CARE OF MOTHERS AND YOUNG CHILDREN

(Section 22).

Child Welfare Centres.

One additional Centre was established during the year bringing the total number of Centres to eighty-nine. The new Centre was opened at Upper Broughton on the 16th August. Minor variations in the existing Centres included the transfer of the Centre previously held at Rhodesia (Worksop) to more suitable premises at the Parish Hall, Shireoaks, the provision of an additional fortnightly session for "toddlers" at the Newark Centre and the reduction, owing to reduced attendances, of the sessions of the Lowdham Centre from two to one session per week.

A list of the Centres now operating in the County, with details of sessions, is set out on pages 41 to 42. The attendances made and medical consultations undertaken at the Centres during 1950 were as follows :—

	ATTENDANCES	MEDICAL CONSULTATIONS
Infants	100,406	24,567
Children	60,529	17,619
Expectant Mothers ..	737	639
Post-Natal Mothers ..	120	106
	161,792	42,931

Ante-Natal and Post-Natal Clinics.

The medical examination of expectant mothers and post-natal cases is undertaken in the scattered rural areas at those sessions of the Child Welfare Centres which are attended by the Medical Officers. In the urban districts and the more populous rural areas, special sessions for ante-natal and post-natal cases are provided and separate sessions for each category are held where the attendances are sufficiently large.

At the end of the year there were seventy-six Centres at which Ante-Natal and Post-Natal examinations were undertaken; twenty-eight of these were at combined centres, separate sessions for ante-natal and post-natal cases were provided at forty-eight centres, and there were seven centres at which special sessions for post-natal work were held. The table given on pages 41 to 42 shows the frequency of the sessions, and particulars of the work undertaken during the year are as follows :—

	ANTE-NATAL	POST-NATAL
<i>Attendances :</i>		
Primary 	4,376	752
Total 	27,688	1,125
<i>Medical Consultations</i> ..	27,141	1,083

Consultant Services.

Three hundred and sixty-nine cases were referred from the Ante-Natal and Post-Natal Clinics for specialist advice to the Consultant Clinics of the Basford Highbury Hospital, Mansfield Victoria Hospital, Nottingham Hospital for Women and the Worksop Victoria Hospital. Reports on X-ray examinations were obtained in eighty cases from the Mansfield and District General Hospital, Newark Town and District Hospital, Nottingham General Hospital and Worksop Victoria and Kilton Hospitals.

Maternity Hospital Treatment.

The ever present and ever pressing task of finding maternity hospital beds was lightened considerably by the active co-operation of the Medical Officers of the hospitals concerned. The uniform method established over the whole County last year for investigating the circumstances of each applicant desiring admission on account of unsuitable home conditions continued to work smoothly and the resultant standardisation of assessment ensured that each case was dealt with on its merits.

The total number of cases admitted during the year was 1,740 ; of these 248 were admitted on account of anticipated complications of maternity and 1,492 owing to the home conditions being unsuitable for confinement.

Provision of Maternity Outfits and Pads.

Four thousand three hundred and thirty-six sterilised maternity outfits and four hundred and forty-six packets of maternity pads were issued for domiciliary confinements on the certificate of the Health Visitor or Midwife engaged for the confinement.

Loan of Elastic Bandages.

No applications were received under the scheme for loaning elastic bandages to expectant mothers on the recommendation of the Ante-Natal Medical Officers.

Birth Control.

Selected cases requiring contraceptive advice are either dealt with at the special session held at the Gilcroft Street Centre, Mansfield, or are referred to the Nottingham Women's Welfare Centre or the Clinics at Orchard Place, Sheffield and Wood Street, Doncaster.

Assistance towards the cost of obtaining such advice and the necessary appliance was afforded in one case.

Maternal Deaths.

Twelve maternal deaths occurred during the year and were located as follows :—

Sanitary District—

Newark Borough	..	..	..	2
Worksop Borough	..	..	..	1
Beeston and Stapleford Urban	..	..	..	1
Carlton Urban ..	..	..	..	1
Eastwood Urban	..	..	..	1
Sutton in-Ashfield Urban	..	..	..	1
Basford Rural ..	..	..	..	1
Bingham Rural ..	..	..	..	1
Retford Rural ..	..	..	..	2
Southwell Rural	..	..	..	1
TOTAL				12

In no case was the cause of death attributable to septic conditions.

Premature Infants.

Arrangements for the care of premature infants provide for the services of a paediatrician, if required by the medical practitioner in attendance, and the loan of special cots and equipment where necessary in cases where the child can be nursed adequately at home. Heated ambulances are available for the transport of children requiring hospital treatment.

During 1950, two hundred and ten premature babies were born at home and three hundred and eight in hospitals or Nursing Homes. Of those born at home, twenty-five were subsequently admitted for hospital treatment.

The Pre-School Child.

The scheme for the ascertainment and follow-up of defects in children under school age was continued, cases requiring treatment being referred to the National Health Service in those cases where the arrangements could not be made directly by this Department.

Services of Paediatricians.

The Regional Hospital Board have placed the part-time services of Consultant Paediatricians at the disposal of the County Council and weekly sessions were established towards the end of the year at the Child Guidance Clinic, Fletcher Gate, Nottingham, and at the Mansfield and Worksop School Clinics. Selected pre-school and school children referred by the Assistant County Medical Officers attend these sessions by appointment and, with the co-operation of the local Hospitals, the Paediatricians are able to arrange for any necessary treatment to be undertaken by the appropriate hospital departments.

Chronic Tonsils and/or Adenoids.

Ninety-four pre-school children requiring operative treatment were referred to the Nottingham Children's Hospital, the Mansfield, Newark, Retford and Worksop General Hospitals or to the Worksop Kilton Hospital.

Orthopaedic Treatment.

During the year 336 children were referred by the Medical Officers of the Child Welfare Centres to the various Orthopaedic Clinics now administered by the Regional Hospital Board.

Boarded-Out Children.

Investigations into the home conditions of one hundred and sixty-four applicants who wished to undertake the duties of foster parents were undertaken by the Health Visitors on behalf of the Children's Department.

Daily Guardians Scheme.

The arrangements for the registration and payment of women suitable and willing to undertake the care of children while their mothers are at work were continued during the year.

Cases on Register at 1st January, 1950	..	56
New cases approved	.. ..	64
Cases discontinued	.. ..	63
Cases on Register at 31st December, 1950	..	57

Day Nurseries.

The average attendances at the Nurseries were as follows :—

	Under 2 years	2-5 years
Beeston	8	28
Carlton	5	13
Eastwood	10	26
Harworth	9	24
Mansfield (Bull Farm)	10	25
„ (Ravensdale)	8	24
Newark	6	19
Stapleford	11	34
West Bridgford	5	13

Nurseries and Child Minders Regulation Act, 1948.

There are two Child Minders registered under this Act, approval being given for the care of four children in one case and fifteen children in the other.

Dental Care of Expectant and Nursing Mothers and of Children Under School Age.

The very serious shortage of Dental staff mentioned in the Reports for previous years continued during the whole of 1950, and so, once again, it is necessary to have to report that the approved dental scheme under Section 22 of the National Health Service Act could be implemented only to a very limited extent.

The limited available services were, as far as possible, spread evenly throughout the whole of the administrative County, but, as in the previous year, there were numerous occasions on which the planned work of a session was seriously interfered with by the unexpected attendance of schoolchildren suffering from toothache.

The general position was such that the dental staff had no alternative but to advise many of the expectant and nursing mothers who sought their services to endeavour to seek their necessary dental treatment through the agency of private practitioners working under the National Health Service Scheme. The most serious difficulties arose in regard to the provision of adequate dental treatment for children under school age, because only a limited proportion of the private practitioners within the administrative County are willing to accept these young children as patients. It will be noted from the following statistical table that 525 such children received dental treatment from the County Council's Dental Officers, but this is only a very small proportion of the total number of these "toddlers" who did, in actual fact, require dental treatment. No information can be obtained as to the number of young children who received treatment through other agencies.

The procedure by means of which artificial dentures are constructed by a firm of independent dental technicians working under contract with the County Council was continued during the year, and under this scheme 290 individual women were provided with either complete or partial dentures.

In regard to the facilities for the taking of X-ray photographs, there are seven dental clinics within the County which are equipped with dental X-ray units, with the result that any expectant or nursing mother and pre-schoolchild requiring dental X-ray photographs may have these taken at short notice and at the clinic at which they attend for treatment.

The following statistical table indicates that in spite of the serious shortage of staff, a fair amount of treatment was accomplished but, unfortunately, the table can give no indication of the amount of treatment which had to be left undone.

(a) Numbers provided with dental care.

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers ..	491	487	404	338
Children under five ..	525	525	525	525

(b) Forms of dental treatment provided.

	Extractions	Anaesthetics		Fillings	Sealings or Sealings and gum treatment	Silver Nitrate treatment	Dressings	Radiographs	Dentures provided	
		Local	General						Complete	Partial
Expectant and Nursing Mothers	1817	606	—	821	134	5	198	*	150	140
Children under five	749	382	1	184	—	265	105	*	—	—

* Numbers not recorded.

MIDWIFERY (Section 23).

The Nottinghamshire County Council are the Local Supervising Authority for the whole administrative County.

During the year 224 Midwives notified their intention to practise in the County area, three of these restricting their activities to maternity nursing only.

Supervision is normally carried out by the whole-time non-Medical Supervisor of Midwives, Miss M. K. Collins, the part-time non-Medical Supervisor of Midwives, Miss R. E. Hermes, and by Dr. Black in special cases. Four hundred and eighty-two visits and 2,102 investigations into abnormal cases were made during the year.

Suspension from practice in order to prevent the spread of infection was necessary in the case of twenty-two Midwives, *i.e.*, County Midwives—ten, District Nurse-Midwives—twelve.

In 1950 medical aid was sent for in 1,232 cases, 1,204 by Domiciliary Midwives and 28 by Midwives practising in Hospitals or Institutions.

The number of claim forms submitted by Medical Practitioners was 642, claiming fees amounting to £1,931 0s. 8d.

Other statutory notices were received from Midwives as follows :—

Notifications of Stillbirth	..	..	..	86
Do. Death of Child	..	..	..	40
Do. Death of Mother	..	..	..	3
Do. Laying out the Dead	..	..	..	8
Do. Liability to be a Source of Infection				106
Do. Artificial Feeding	..	..	..	419
				662

Eye Discharge in the Newborn.

Seventy-four cases of inflammation of, or discharge from, the eyes of new-born infants were notified, eight being also notified as Ophthalmia Neonatorum.

Every case attended by a Midwife was inquired into immediately by a Supervisor (Non-Medical) of Midwives, and was subsequently followed-up by a Health Visitor.

Six cases received hospital treatment and unimpaired vision resulted in all cases.

Puerperal Pyrexia.

Twenty-two cases of Puerperal Pyrexia were notified during the year, as follows :—

Domiciliary Confinements	17
Institutional Confinements	5

Of the seventeen confined at home, nine were subsequently admitted to hospital for treatment. All made good recoveries.

County Midwives.

The number of whole-time Midwives employed directly by the County Council at the end of 1950 was sixty-five. Three Midwives resigned during the year and four new appointments were made.

The following is a summary of the work done by the County Midwives during the year :—

	Visits.		
Ante-Natal—Home	..	..	29,431
Clinic	..	..	8,296
Deliveries—Midwifery	..	..	2,488
Maternity	..	..	958
			3,446
Lying-in	..	..	62,637
			103,810

Transport.

Fifty-five of the County Midwives use motor-cars for the purpose of carrying out their duties ; the remainder normally use bicycles but hire cars when necessary for emergency or long distance cases. Travelling allowances are paid in accordance with the County Council's scales. Assistance in purchasing cars under the Council's Car Purchase Scheme was afforded in eight cases and the arrangements made by the Ministry of Health with the motor industry again proved most helpful in accelerating the delivery of cars.

Gas and Air Analgesia.

Three District Nurse-Midwives received training in the administration of gas and air analgesia at the Basford Highbury Hospital during 1950 and were successful in passing the examination.

At the end of 1950 there were one hundred and eighteen Midwives qualified to administer gas and air analgesia ; of these sixty-three were County Midwives and fifty-five District Nurse-Midwives.

Sixty-three County Midwives and fifty-one District Nurse-Midwives were in possession of a Minnitt Gas-Air Apparatus at the end of 1950.

Two thousand one hundred and fifty-five cases received gas and air analgesia during their deliveries, 1,443 of these administrations being given by County Midwives and 712 by District Nurse-Midwives.

The routine inspection and maintenance of the apparatus is undertaken by skilled engineers under an arrangement made with the manufacturers.

Agency Arrangements with the Nottinghamshire Nursing Federation and District Nursing Associations.

The arrangements described in the Annual Reports for 1948 and 1949 for the utilisation of the Nottinghamshire Nursing Federation and the affiliated and associated District Nursing Associations in connection with the provision of the Domiciliary Midwifery Service continued to operate throughout the year 1950.

Certain re-organisation has been effected, and the number of District Nursing Associations participating in this Service at the end of the year was fifty-one, as compared with fifty-three at the end of 1949.

The sixty-one Nurse-Midwives employed by these Associations attended 1,565 confinements during the year, and their services represented the equivalent of twenty-four full-time Midwives. In 1949 sixty-three Nurse-Midwives attended 1,760 confinements, and their services represented the equivalent of twenty-seven full-time Midwives.

Further comment on the work undertaken by the District Nurse-Midwives employed by District Nursing Associations will be found under the heading of " Home Nursing."

HEALTH VISITING (Section 24).

The Pupil Health Visitor Training Scheme established by the Nottingham University in conjunction with the Nottingham Corporation and the County Council resulted in six Health Visitors being available for appointment to the County Staff ; in addition, one Health Visitor was secured through normal recruitment.

There was a loss by resignation or retirement of one Superintendent, four Health Visitors and one Clinic Nurse. Two Health Visitors were promoted to Superintendents and the Health Visiting staff at the end of 1950 was comprised of three Superintendents and sixty-seven Health Visitors, there being eleven vacancies.

The home visiting figures show an increase of 13,724 on those for 1949, the details being as follows :—

First Visits to Infants	9,423
First Visits to Children	1,868
Re-visits to Infants	41,306
Re-visits to Children	99,572
Visits to Expectant Mothers	8,795
Visits to Post-Natal Mothers	514
General Health Visiting	2,038
	163,516

The cases in which the Health Visitors were consulted on General Health Visiting matters covered a large field as is indicated in the following table :—

Age and Infirmary	31	Mental Defectiveness	6
Bronchitis	14	Miscellaneous Troubles	18
Congenital Deformity	2	Muscular Trouble	6
Deafness	2	Nervous Conditions	12
Defective Vision	9	Paralysis	13
Dental Conditions	2	Pneumonia	17
Diabetes	4	Post-Operative Care	20
Epilepsy	1	Prolapse	5
Gastric Trouble	3	Rheumatism	13
General Debility	15	Skin Diseases	15
Glandular Conditions	6	Spinal Conditions	5
Heart Complaints	11	Stroke	3
Other Circulatory Conditions	20	Tonsillitis	9
Infectious Diseases	26	Tuberculosis	12
Influenza	9	Wounds and Accidents	14

HOME NURSING (Section 25).

The arrangements for the provision of a Home Nursing Service remained substantially the same during 1950 as in 1949.

At the end of the year, due to the re-organisation referred to under the heading of "Midwifery," the number of District Nursing Associations participating in the Service was seventy-one, as compared with seventy-two in the previous year. There were, however, two Associations without Executive Committees or Honorary Officers, and although continuity of service was ensured by the administration of these Associations' affairs by the Nottinghamshire Nursing Federation this arrangement could not be regarded as altogether satisfactory.

As regards staffing there is very little to add to what was said in the last Annual Report, and the staff is still numerically very considerably short of the standard of one per four thousand of the population laid down in the County Council's Proposals.

The ready co-operation of the Housing Authorities in providing housing accommodation for District Nurses is again gratefully acknowledged. During the year four further District Nurses were allotted Council houses, and the County Council themselves purchased and renovated a property at Kinoulton for the use of the District Nurse serving the Hickling and District Nursing Association's area.

The anomaly referred to in the last Report, which results when a Housing Authority allocate a house to a Nurse and not to her employing body, is still giving rise to considerable difficulty. It is manifestly unfair that where two Nurses are occupying exactly similar accommodation one should be required to pay the full rent, while the other is required to pay ten shillings a week only, because the house is let to her employing body and not to the Nurse herself.

Moreover, the allocation of the house to the employing body ensures that it is always available for whichever District Nurse is serving the area for the time being.

The purchase of motor cars was approved for five District Nursing Associations during the year, and the provision of garages was authorised in nine instances, in each case through Sherwood Industries.

The more generous scale of nursing equipment which has been provided for District Nurses since the County Council assumed responsibility for the Home Nursing Service has created problems of storage which have been solved by the provision of cupboards specially made for the purpose by Sherwood Industries. These cupboards have been very highly commended by the County Superintendent of the Nottinghamshire Nursing Federation and by the District Nurses. Their provision involved during the year a total expenditure of approximately £450.

The long-awaited decision of the Nurses Whitley Council with regard to the salaries of District Nurses and Midwives was received during the year. The general effect of this decision—which operated as from the 1st February, 1949—was to increase the minimum of the scale of salaries applicable to each category by £40 per annum and the maximum by £60 per annum. For the period from the 1st February, 1949, to the 31st March, 1950, the total additional cost resulting from the decision amounted to approximately £16,000, of which £4,000 was attributable to Midwifery and £12,000 to Home Nursing.

In recent years much has been done to improve the conditions of service of the nursing profession generally, but still the number of nurses available is inadequate for the country's needs, whether hospital or domiciliary—this despite the fact that it is stated that the number of women employed in the nursing profession is greater than ever before. One cannot, therefore, escape the conclusion that the problem of the shortage of nurses will not be solved merely by improving conditions of service.

The County Council agreed to send six District Nurses to a Refresher Course held at Bangor from the 14th to the 21st April, and the Nurses who attended the Course have expressed their appreciation of the County Council's action.

It is pleasing to record the public spirit shown by the Hucknall District Nursing Association in offering a Hall in their possession for conversion into flats for District Nurses and themselves undertaking to pay £700 of their own money towards the cost.

During the year the County Council agreed to refurnish the District Nurses' Home at Retford at a cost of £225.

Three Associations during the year handed over to the County Council's Superannuation Fund the proceeds of the sale of motor cars no longer fit for the exacting requirements of District Nurse-Midwives. Two second-hand cars which had been purchased by the County Council for use by a District Nursing Association and the Nottinghamshire Nursing Federation were also sold.

A statistical table is appended, showing the work undertaken by the District Nurses during the year in connection with the Home Nursing Service, with figures for 1949 for comparison.

Home Nursing Statistics, 1950.

(Figures in brackets relate to the year 1949).

Total No. of Cases attended	.. ..	9,050	(8,387)
Average No. of Cases attended per equivalent of whole-time Nurse	.. ..	106	(106)
Total No. of Visits paid	.. ..	225,575	(208,000)
Average No. of Visits paid per equivalent of whole-time Nurse	.. ..	2,536	(2,633)
	.. ..	or	or
		49 per week	(51 per week)

Average No. of Visits paid per Case ..	25	(25)
Equivalent of Whole-time Staff employed in Home Nursing	85†	(79)
Equivalent of Whole-time Staff required on basis laid down in County Council's Proposals (1 per 4,000 population—County population mid-1949—523,160*) ..	131	(130)
Extent to which Existing Staff falls short of requirements (expressed as equivalent of Whole-time Nurses)	46	(51)
Ratio of Existing Staff to Population (expressed as equivalent of Whole-time Nurses)	1 per 6,154	(1 per 6,651)

* Estimated increase of population 1948-9 was 4,860.

† The total number of individual Nurses (excluding administrative and supervisory staff) employed in the Service at 31-12-50 was 110. Of these 47 were engaged full-time in Home Nursing and 63 gave part of their time to Midwifery. The time devoted to Home Nursing by these 63 Nurse-Midwives was equivalent to the services of 38 full-time Home Nurses.

VACCINATION AND IMMUNISATION (Section 26).

Diphtheria Immunisation.

During 1950 the Council continued to use the services of District Medical Officers of Health, acting as their agents on agreed terms, for the organisation and conduct of approved sessional arrangements, and reimbursed to the several County District Councils the whole of the approved cost involved. The Council's medical and nursing staffs also assisted in the work where necessary, individual immunisations being carried out at Child Welfare or School Clinic sessions, all such Centres being equipped for the purpose.

In addition, the opportunity to serve under the Council's arrangements continued to be extended to all general medical practitioners in the County area and at 31st December, 1950, two hundred and nineteen practitioners were participating in this Scheme, an increase of thirty-one during the year.

The following table shows the estimated population of children under five and aged five to fourteen years and the number of children in these two age groups who had completed a full course of immunisation at any time up to 31st December, 1950, in each of the County Districts and in the whole County area :—

DIPHTHERIA IMMUNISATION, 1950.

DISTRICT.	ESTIMATED POPULATION.			No. of CHILDREN IMMUNISED AT ANY TIME UP TO 31/12/50.	
	0-4 yrs.	5-14 yrs.	Total (under 15)	0-4 yrs.	5-14 yrs. Total (under 15)
Urban Districts.					
Mansfield (Borough)	4,366	7,169	11,535	2,099	7,001
Worksop (Borough)	2,993	4,960	7,953	1,333	885*
Newark (Borough)	1,911	3,060	4,971	1,201	2,720
East Retford (Borough)	1,404	2,198	3,602	652	2,430
Arnold ..	1,949	2,909	4,858	1,390	2,915
Beeston and Stapleford	4,597	7,271	11,868	2,607	6,362
Carlton	3,092	4,530	7,622	1,753	3,566
Eastwood	946	1,416	2,362	530	1,079
Hucknall	2,138	3,559	5,697	1,186	2,274
Kirkby-in-Ashfield	1,844	3,055	4,899	1,065	2,752
Mansfield Woodhouse	1,778	2,863	4,641	829	2,408
Sutton-in-Ashfield	3,548	6,016	9,564	2,475	5,890
Warsop	1,048	1,758	2,806	754	1,432
West Bridgford ..	1,746	2,786	4,532	1,088	1,838
TOTAL (Urban Districts)	33,360	53,550	86,910	18,962	43,552
Rural Districts.					
Basford	4,310	7,030	11,340	2,477	5,640
Bingham	1,481	2,399	3,880	794	1,698
Worksop	1,554	2,614	4,168	968	2,450
East Retford	1,683	2,775	4,458	949	3,000
Newark	897	1,623	2,520	511	1,523
Southwell	3,405	5,759	9,164	2,008	5,742
TOTAL (Rural Districts)	13,330	22,200	35,530	7,707	20,053
Whole County—GRAND TOTAL	46,690	75,750	122,440	26,669	63,605

*Complete figures not available.

The figures for the Urban Districts, Rural Districts, and the whole County expressed as percentages are as follows :—

	PERCENTAGE OF CHILDREN UNDER 15 YEARS IMMUNISED UP TO 31ST DECEMBER, 1950.		
	0-4 years.	5-14 years.	Total (under 15 years).
Urban Districts	56·8	87·8*	75·2
Rural Districts	57·8	90·3	78·1
Whole County	57·1	88·6*	76·0

* Excluding one District for which complete figures not available.

Diphtheria—Notifications and Deaths.

It is most pleasing to report for the first time that in no case was a diagnosis of diphtheria confirmed during the year and that 1950 was the second year in succession during which no deaths occurred from this disease.

Vaccination against Smallpox.

The same methods and procedure as outlined under the heading “Diphtheria Immunisation” have applied to Smallpox vaccination and particulars of the work carried out in the several County Districts during 1950 are as set out in the following table :—

District	NUMBER VACCINATED.					NUMBER RE-VACCINATED.				
	Under 1 year	1—4 years	5—14 years	15 years and over	TOTAL	Under 1 year	1—4 years	5—14 years	15 years and over	TOTAL
Urban Districts.										
Mansfield (Borough) ..	107	26	18	35	186	—	1	10	58	69
Worksop (Borough) ..	43	82	10	16	151	—	—	3	13	16
Newark (Borough) ..	111	16	13	40	180	—	1	3	64	68
East Retford (Borough)	22	4	1	3	30	—	2	—	2	4
Arnold ..	178	16	32	22	248	—	—	2	40	42
Beeston and Stapleford	231	42	25	42	340	11	2	16	115	144
Carlton ..	155	16	12	13	196	—	1	3	29	33
Eastwood ..	14	18	8	—	40	—	—	—	3	3
Hucknall ..	93	8	3	26	130	—	1	3	25	29
Kirkby-in-Ashfield ..	33	12	10	5	60	—	—	—	1	1
Mansfield Woodhouse ..	64	18	12	17	111	—	—	—	35	35
Sutton-in-Ashfield ..	152	13	11	14	190	—	—	1	35	36
Warsop ..	55	16	15	26	112	—	—	1	29	30
West Bridgford ..	173	18	3	13	207	—	3	1	20	24
TOTAL (Urban Districts)	1,431	305	173	272	2,181	11	11	43	469	534
Rural Districts.										
Basford ..	160	100	191	13	464	1	5	9	38	53
Bingham ..	111	13	11	6	141	—	1	1	11	13
Worksop ..	31	52	4	7	94	—	—	—	13	13
East Retford ..	111	7	3	9	130	1	2	5	19	27
Newark ..	47	7	22	10	86	—	1	49	22	72
Southwell ..	222	55	20	12	309	—	—	3	21	24
TOTAL (Rural Districts)	682	234	251	57	1,224	2	9	67	124	202
Whole County— GRAND TOTAL	2,113	539	424	329	3,405	13	20	110	593	736

It is interesting to note that the increase in the numbers vaccinated or re-vaccinated in this County during 1950 (*i.e.*, a total of 4,141 compared with 2,661 in 1949) was largely attributable to the coincidence of the Scotland *v.* England Football International Match at Glasgow with the outbreak of Smallpox in that City.

Arrangements are made for issuing advice and information and for securing the necessary vaccination or re-vaccination of those involved or likely to be involved in the event of an outbreak of Smallpox in the County area.

Whooping Cough Inoculation.

The arrangements for Whooping Cough inoculation which existed in three County Districts prior to 5th July, 1948, were continued during 1950 to the extent indicated below :—

DISTRICT	No. of children who completed a full course of inoculations during the year ended 31-12-50.		
	0-4 years	5-14 years	TOTAL
Mansfield (Borough) ..	204	3	207
Kirkby-in-Ashfield (Urban District) ..	156	4	160
Sutton-in-Ashfield (Urban District) ..	208	4	212
TOTALS ..	568	11	579

In the absence, however, of evidence that the procedure is as effective as one would wish it has still not been considered advisable to introduce this measure throughout the whole County area.

AMBULANCE SERVICE (Section 27).

During 1950, 77,833 calls were made involving 97,204 patients and the travelling of 968,651 miles by ambulances and cars of the Service. Of the 77,833 calls made, 7,036 (9%) were in respect of accidents and other emergencies, a considerably fewer number than in 1949, when a total of 9,224 (13.8%) accident and other emergency calls were attended.

It is interesting to note that, compared with the work done in 1949, the calls received increased by 18.6%, the patients carried increased by 20.1%, but the mileage involved increased by only 10.3%; this indicates that the co-ordination of the service by County Control and the Main Ambulance Stations, the close collaboration between Hospital staffs, general practitioners, and the Ambulance Service, and the reducing to a minimum of "empty" journeys is resulting in a comparative saving in mileage.

The demand for ambulance transport reached its highest point during the first six months, and eased somewhat during the second six months of the year, and unless new categories of patients needing transport arise it would appear that the peak has been passed, and that a steady demand may be anticipated.

The following table shows the work undertaken by each of the Main Stations, Sub-Stations and Depots during the year :—

STATION, SUB-STATION OR DEPOT	CALLS	PATIENTS CARRIED	TOTAL MILEAGE
NOTTINGHAM GROUP STATION :			
Arnold Depot	3,178	3,806	24,957
Beeston Depot	6,668	7,544	77,640
Carlton Depot	5,243	7,062	58,353
Hucknall Depot	5,814	7,785	76,819
West Bridgford Depot ..	5,425	6,365	80,112
Eastwood Sub-Station ..	2,778	3,381	27,362
Kirkby-in-Ashfield Sub-Station	3,543	4,167	30,540
Ruddington Sub-Station ..	1,701	2,618	24,516
Southwell Sub-Station ..	1,005	1,304	17,032
MANSEFIELD MAIN STATION :			
Bilsthorpe Sub-Station ..	1,354	1,534	19,155
Ollerton Sub-Station ..	1,472	1,857	22,193
Warsop Sub-Station ..	1,617	2,017	16,211
NEWARK MAIN STATION ..	7,045	7,857	76,159
RETFORD MAIN STATION ..	5,479	5,891	104,957
WORKSOP MAIN STATION ..	6,628	8,419	91,122
Harworth Sub-Station ..	643	1,465	18,470
TOTALS ..	77,833	97,204	968,651

Vehicles.

The approved establishment of vehicles remained at forty-two ambulances and thirteen cars. At the beginning of the year the vehicle strength was forty-one ambulances and eleven cars. During the year ten obsolete ambulances (seven of which were taken off the vehicle strength in 1949) were sold and one new and one second-hand (1949) Bedford 28 h.p. ambulances, one new Morris 25 h.p. ambulance, and two Bedford 28 h.p. transit ambulances (used mainly for sitting patients) were purchased; the vehicle strength at the end of 1950 being forty-one ambulances and thirteen sitting-case vehicles. The average age of all vehicles was approximately three years.

Three 1944 army type 25 h.p. Austin ambulances were converted to civilian type ambulances by a local coach building firm during the year.

It was decided that new ambulances should be painted Cambridge Blue and Grey instead of Cream and Black, and that existing ambulances should be repainted in the new colours as repainting becomes necessary.

The use of tyres which had been remoulded by the appropriate manufacturer was adopted.

Stations and Premises.

The existing ambulance accommodation was still in many instances far from adequate with vehicles standing outside in all types of weather, and staff facilities being unsatisfactory and in some cases non-existent. The search for better premises and sites on which to erect new buildings has been continued during the year but with limited results.

1. SOUTHWELL.

A garage at 7 King Street, Southwell, was purchased on the 14th March, 1950, and on the 29th April, the Southwell Ambulance Sub-Station was transferred to the new premises.

2. MANSFIELD.

The Rufford Garage, Ratcliffe Gate, Mansfield, was purchased on the 3rd October, 1950, the Mansfield Ambulance Station having been transferred to the new premises on 22nd September, 1950. Extensions to the new garage are planned and when these are completed the whole premises will provide a first-class ambulance station.

3. OLLERTON.

The Ollerton ambulance was garaged free of rent on National Coal Board premises but these premises were required, and arrangements are to be made to transfer the ambulance to premises at Edwinstowe as originally envisaged in the County Council's approved Proposals. In the meantime the Ollerton ambulance and personnel are based at the Main Station at Mansfield.

4. RETFORD.

On the termination of the Agency agreement with the Retford Hospital Fund Committee the tenancy of the garage at Exchange Street, Retford, was transferred to the County Council. These premises are, however, far from satisfactory and the provision of new station premises has been approved.

Accommodation was not obtained at Bingham, Kimberley, Misterton and Tuxford and the Sub-Stations at these places were accordingly not opened, but it is anticipated that premises at Kimberley will soon be made available.

Staff.

The total establishment of ambulance personnel at the end of the year was 196 including fifteen Clerk-Telephonists and three clerical staff.

The total staff employed on the 31st December, 1950, was 180, an increase of thirteen on the total employed on the previous 31st December.

During the year most of the new uniform ordered in November 1949 was received and the majority of the uniformed staff were issued with uniform consisting of a reefer type jacket and trousers and new caps ; a number of navy blue gabardine raincoats were also issued.

Authority was given for ambulance personnel to receive Civil Defence training, but no members of the staff commenced training in 1950.

New entrants to the Ambulance Service will be required to undergo periodic medical examination, and the majority of existing personnel agreed to be included in the scheme.

First Aid Equipment.

Following the receipt of Circular 51/50 from the Ministry of Health the standard scale of first aid equipment was increased to include :—

Bedpans—one per ambulance.

Feeding cups—one per ambulance.

Hot water bottles—one per stretcher.

Rubber mattresses—one spare mattress for each Station, Sub-Station or Depot.

Maternity packs—one pack per ambulance.

In addition the scale of resuscitators was increased from one per station (seventeen in all) to one per ambulance (forty-two in all).

PREVENTION OF ILLNESS, CARE AND AFTER-CARE (Section 28).

Tuberculosis.

Deaths.

During 1950 the number of deaths attributable to Tuberculosis was 185 ; 164 from Pulmonary Tuberculosis and twenty-one from other forms. The Pulmonary death rate per thousand of the population was 0.31 for the County compared with 0.32 for England and Wales, whilst the rate for all forms was 0.35 for the County and 0.36 for England and Wales.

New Cases and Mortality.

The number of new cases recorded during 1950 in the Registers of the Medical Officers of Health of County Districts and the number of deaths in the County due to Tuberculosis according to the Registrar General's statistics for the year were as set out in the following table :

AGE PERIODS	NEW CASES (including "Inward Transfers")				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0— 1 ..	1	—	1	—	—	—	—	—
1— 4 ..	5	8	2	5	—	—	1	5
5—14 ..	19	19	10	7	—	—	—	1
15—44 ..	156	190	10	13	45	61	8	4
45—64 ..	45	13	—	1	31	9	1	1
65 and over ..	11	4	—	—	13	5	—	—
TOTALS ..	237	234	23	26	89	75	10	11

Incidence—Pulmonary Tuberculosis.

The following table shows the incidence of Pulmonary Tuberculosis in the County over the past eight years :—

YEAR	* NO. OF NEW CASES INCLUDED IN ANNUAL RETURN TO MINISTRY OF HEALTH.			Rate per 1,000 of population
	Formal notification	Not notified before death	Total	
1943	369	28	397	0·84
1944	388	16	404	0·85
1945	332	20	352	0·74
1946	352	22	374	0·75
1947	431	27	458	0·91
1948	425	15	440	0·85
1949	369	18	387	0·74
1950	401	18	419	0·78

* Excluding " Inward Transfers."

Examination of " Contacts."

The following figures provided by the Chest Physicians jointly employed by the Sheffield Regional Hospital Board and by the County Council give some indication of preventive work undertaken at the Chest Centres during 1950 :—

" CONTACTS "				Adults		Children	TOTAL
				M.	F.		
No. examined during 1950				165	291	878	1,334
No. diagnosed as—							
(a) Tuberculous				15	21	41	77
(b) Non-tuberculous				138	242	796	1,176
No. under observation 31.12.50 ..				12	28	41	81

Home Visits.

The number of domiciliary visits made by Health Visitors during the year was 4,714 compared with 4,528 similar visits during 1949.

Shelters.

The number of shelters owned by the Council is twelve and their use during 1950 was as follows :—

No. on loan to patients 1-1-1950	..	..	12	
No. returned during the year	..	..	6	
			6	
No. loaned during the year	..	..	2	
No. on loan to patients 31-12-1950	..	..	8	
No. in store on 31-12-1950	..	..	4	
				12

Co-operation with Other Authorities.

The Council's former Senior Tuberculosis Officer who, with his clerical staff, had continued working from the County Health Department following the transfer of the major part of his time to the service of the Sheffield Regional Hospital Board on 5th July, 1948, moved to the Nottingham and District Chest Centre at "Forest Dene," Gregory Boulevard, Nottingham, in April, 1950. This final separation under the provisions of the National Health Service Act occasioned some considerable re-organisation of procedure during the remainder of the year in an endeavour to preserve the essential unity of this service.

Co-operation with the Regional Hospital Board by sharing the services of medical specialists and by the attendances at the Chest Centres of the Council's Health Visitors and Almoners continued during 1950 and the Council were pleased to assure the Board of their willingness to co-operate fully in the implementation of recommendations of the Tuberculosis Standing Advisory Committee as set out in Ministry of Health Circular RHB.50(64).

County District Medical Officers of Health were systematically provided with brief clinical particulars of each diagnosed case of tuberculosis and informed as to any housing or environmental defects ascertained by the Tuberculosis staff. They were also kept informed of all changes in circumstances as, for example, admissions to and discharges from hospitals and sanatoria, deaths, removals, marriages of female patients, etc.

Protection of Children from Tuberculosis.

During the year consideration was given to recommendations made to the Minister of Health by the Joint Tuberculosis Council regarding

the protection of organised groups of children against the risk of infection by adults suffering from tuberculosis. Having regard for the services of the Council's Officers which are shared with the Regional Hospital Board without charge, particularly in the Tuberculosis Service, the Council made representations against the Minister's decision that fees would be payable to the Regional Hospital Board by the Authority for individual chest X-ray examinations of candidates for employment involving close contact with groups of children. The Council proceeded, however, with arrangements for the periodic X-ray examination by Mass Radiography Units of the chests of persons already in such employment which the Minister advised might be undertaken without charge.

B.C.G. Vaccination.

Consultation with the Chest Physicians concerned continued throughout 1950, but owing to the pressure of their work in connection with the treatment of notified cases and the peculiar difficulties involved in a County area in following the prescribed clinical procedure arrangements for the employment of B.C.G. vaccination were unfortunately not completed by the end of the year. It is expected that additional staff will be made available in due course.

Nottingham and Notts. Association for the Prevention of Tuberculosis.

The arrangements whereby the Council's preventive and care functions in relation to persons suffering from tuberculosis are carried out under agency arrangements by the Nottingham and Notts. Association for the Prevention of Tuberculosis as described in my 1948 Annual Report were continued during 1950, but in view of the comparatively small number of cases being dealt with the subsidy paid to the Association by the Council was reduced from £950 to £750 per annum as from 1st January, 1950.

The following is the Association's report on their activities during the year :—

“ The Nottingham and Nottinghamshire Association for the Prevention of Tuberculosis has continued to carry out care and after-care work on behalf of the County Council on similar lines to those outlined in previous Reports, and the grant payable to the General Committee and its three Sub-Committees has been at the rate of £750 per annum for the period under review.

During the year 257 new cases were referred to the Association but altogether 362 cases were considered and assistance given where necessary. Each case received individual consideration and the types of help which were given are shown in the following statistics.

General Committee.

No. of new cases	..	..	..	..	..	187
No. of cases considered for assistance	..	..	..	..	..	275

Analysis of Assistance.

Referred to National Assistance Board for monetary grants						110
Bed and bedding loaned	..	..	..	..		15
Bedding only loaned	..	..	..	..		7
Dunlopillo beds loaned	..	..	..	..		2
Invalid chairs loaned	..	..	..	..		6
Nursing requisites loaned	..	..	..	..		23
Milk permits issued	..	..	..	..		29
*Admission to Convalescent Home, including payment of fees						2
Clothing provided	..	..	..	..		17
*Grants towards clothing	..	..	..	..		2
*Assistance <i>re</i> hire purchase payments	..	..	..	..		4
*Occupational therapy provided	..	..	..	..		3
*Travelling expenses for parents to visit			..	..		5
Assistance <i>re</i> National Insurance	..	..	..	..		12
Assistance <i>re</i> housing	..	..	..	..		5
Assistance <i>re</i> work	..	..	..	..		13
Assistance <i>re</i> Home Help	..	..	..	..		6
Assistance <i>re</i> pension	..	..	..	..		4
Requests from patients for advice, assistance or information						19
Other forms of help	..	..	..	..		24
*Christmas parcels distributed	..	..	..	..		40
Investigated but no help considered necessary	..	..	..	..		21

Mansfield Sub-Committee.

No. of new cases	..	..	..	..	..	43
No. of cases considered for assistance	..	..	..	..	..	47

Analysis of Assistance.

Bed and bedding loaned	..	..	..	..		11
Bedding only loaned	..	..	..	..		6
Nursing requisites loaned	..	..	..	..		10
Milk permits issued	..	..	..	..		27
Clothing provided	..	..	..	..		6
*Assistance <i>re</i> hire purchase payments	..	..	..	..		1
*Travelling expenses for parents to visit			..	..		2
Requests for advice, assistance or information	..	..	..	..		1
Assistance in conjunction with Women's Voluntary Services						4
*Christmas parcels distributed	..	..	..	..		15
Other form of help	..	..	..	..		1

Newark and Southwell Sub-Committee.

No. of new cases	..	..	..	..	..	13
No. of cases considered for assistance	..	..	..	..	..	21

Analysis of Assistance.

Bed and bedding loaned	..	..	..	..	2
Nursing requisites loaned	..	..	..	..	4
Milk permits issued	..	..	..	..	18
Assistance <i>re</i> housing	..	..	..	..	1
*Christmas parcels distributed	..	..	..	..	15

Worksop and Retford Sub-Committee.

No. of new cases	..	..	..	..	14
No. of cases considered for assistance	..	..	..	..	19

Analysis of Assistance.

Bed and bedding loaned	..	..	..	..	2
Bedding only loaned	..	..	..	..	2
Nursing requisites loaned	..	..	..	..	5
Milk permits issued	..	..	..	..	8
Clothing provided	..	..	..	..	4
*Assistance <i>re</i> hire purchase payments	..	..	..	..	1
*Travelling expenses for parents to visit	..	..	..	..	1
Referred to Harefield Fund for Nurses for special grant	..	..	..	..	1
*Christmas parcels distributed	..	..	..	..	17
Other forms of help	..	..	..	..	4

*Denotes help from voluntary funds of the Association."

In addition, the Council's Almoners, acting for the appropriate After-Care Committees at the Mansfield, Retford, Worksop and Newark Chest Centres, assisted a further 202 tuberculous persons as follows :—

Analysis of Assistance.

Referred to National Assistance Board for monetary grants	*165
Assistance <i>re</i> care of children	8
Assistance <i>re</i> Rehabilitation	6
Assistance <i>re</i> housing	7
Assistance <i>re</i> general domestic problems	13
Other general advice	16
No. of home visits involved	104

*Including 13 cases also assisted with other social problems.

Sherwood Village Settlement.

The County Council continued during 1950 to maintain the Sherwood Village Settlement and the associated Sherwood Industries for the rehabilitation of tuberculous persons and, during the year, engaged Mr. R. C. Cullen, M.I.Ec.E., A.M.I.I.A., A.M.I.P.E., Industrial Consultant, to investigate and advise on the Settlement's trading activities which, by this time, were feeling the accumulated effects of the increasingly keener post-war competition. With a remarkable appreciation of all the peculiar problems of a Rehabilitation Unit's

trading activities, Mr. Cullen prepared and submitted an exhaustive and most valuable report and at the end of the year the Council were considering his recommendations and, in accordance therewith, seeking to appoint a General Manager for Sherwood Industries.

The following report has been submitted by the Medical Superintendent, Dr. E. Firth, on the work carried out during the year :—

“ It is always pleasing to be able to report the beginning of a new department, and particularly so when it shows good signs of healthy development.

Such is the Cabinet Section which commenced in January, 1950, and in it many articles of excellent quality have now been made for other departments of the County Council, and an expanding trade should be possible with them.

The Sectional Building Department has been fully employed during the year, and only rising prices and restricted timber supplies will curtail its work.

As foreshadowed in my last report the Painting Department has been discontinued ; much of the work involved appears to be unsuitable for men with active and moderately advanced disease. The use of spray painting equipment, although reducing, very considerably, physical effort, brings other disadvantages which cancel out the reduced toil.

The health of the Settlers has not been quite so good as in 1949, six men having to be admitted to Ransom Sanatorium for further treatment ; each of these men had severe bilateral disease and it was only the special Village Settlement conditions which enabled them to work at all.

The following table shows the length of time in the Village Settlement before their present breakdown :—

<i>Settler</i>	<i>Age</i>	<i>Date of Entry</i>	<i>Date of Breakdown</i>
1	49	12-12-49	21 -1-50
2	29	18-10-43	22- 2-50
3	30	8- 9-47	23- 9-50
4	17	25- 4-49	5-10-50
5	50	12-11-45	20-11-50
6	25	8- 1-45	18-10-50

One Settler, the foreman painter, died during the year and by his death, the Settlement lost its first Settler. He commenced work in 1937 and his frequently expressed faith in the Settlement ideal was a source of strength and encouragement to others.

During the year two settlers were admitted from other Local Authorities, and it is satisfactory to note their continued interest in the scheme.

The new houses are nearing completion, and I hope it will not be long before we are able to commence building a further half-dozen and to make a start on the Printing Department. The families continue to be healthy, and it is gratifying to see the children gain in health and vigour as the years pass by.

The Hostel has been greatly improved by the construction of lawns and flower beds, the work being carried out by one of the settlers aided by two temporary labourers to cope with the very heavy digging and barrow work. The comfort of the Hostel remains at a high level.

Statistics.

Sectional Building	..	..	..	22
Cabinet Department	..	..	..	5
Sanatorium Porters	..	..	..	2

These figures show a decrease of 2 as compared with 1949."

As mentioned in my last Report, a small Drafting Committee representative of both the County and County Borough interests of fifteen Local Health Authorities in the Sheffield Region was busy at the end of 1949 with the preparation of a draft scheme for the setting up of a Joint Board for the future management of the Village Settlement.

By the time this draft scheme was almost ready for submission for the approval of a further Conference of representatives of the interested Authorities, however, information was received regarding a draft circular which the Minister of Health proposed to issue to all Local Health Authorities on the subject of Occupational Re-settlement for Tuberculous Persons. It was not possible on this account to make any progress during 1950.

Other types of Illness.

Loan of Nursing Equipment and Appliances.

The loan of nursing equipment and appliances to patients being nursed at home, either by the issue of the larger items direct from the Public Health Department or the loan, free of charge, of the smaller and more frequently needed items from the homes of District Nurses/Midwives, was also continued during 1950.

During the year one hundred and forty-five cases were assisted by loans direct from the Public Health Department (100 in 1949), appropriate loan charges being made in all but twelve cases where applicants' financial circumstances were such as to warrant free loans under the Council's scheme.

The items loaned in these cases were as follows :—

Air beds 29	Mattress, sectional .. 1
Back rests 11	Self-lifting pole fittings .. 2
Bed tables 2	Spinal carriages 6
Bedsteads, single size 5	Stool commodes 12
Crutches 5 prs.	Walking machine .. 1
Dunlopillo mattresses 17	Wheel chairs—"Stairway" 7
Do. pillow .. 1	Do. "Merlin" .. 9
Fracture boards .. 1 set	Do. Folding .. 43

General Care and After-Care.

Arrangements for the care and after-care of persons on discharge from hospital or convalescent home whereby such cases are followed up by the Council's Health Visiting or Almoner service to ascertain their precise need and to take appropriate action were continued, two hundred and thirty-one cases of this type being dealt with by the County Almoners during the year as follows :—

In connection with hospital discharge 5
Do. rehabilitation 24
Do. bedding and clothing 9
Do. domestic problems 49
Follow-up visits on discharge from hospital .. 56
Other general advice 88
<u>231</u>
No. of home visits involved 345

Chronic Sick and Senile Patients.

Co-operation with the Sheffield Regional Hospital Board by investigating and reporting at the request of a hospital authority or bed bureaux on the home circumstances of chronic sick and senile patients either awaiting admission to or discharge from hospital also continued during 1950, three hundred and forty-six cases of this type being dealt with by the County Almoners during the year as follows :—

Investigations with a view to hospital admission—

(i) Hospital admission recommended .. 173
(ii) Do. not recommended .. 125

Investigations with a view to hospital discharge—

(i) Hospital discharge recommended .. 26
(ii) Do. not recommended .. 22

346

No. of home visits involved 288

Convalescence.

By arrangement with the Sheffield Regional Hospital Board the Council's Almoners include amongst their duties the regular visitation of certain hospitals in the County which are without hospital almoners and, in the continuing absence of any decision as to the respective responsibilities of Regional Hospital Boards and Local Health Authorities for the provision of Convalescence, the County Almoners advised and assisted patients in obtaining suitable convalescence during 1950 as indicated :—

No. of Cases Referred During the Year.			No. of Cases for whom Convalescent Accommoda- tion was Obtained.		No. of Cases who either made other arrangements or declined accom- modation offered
By Hospitals	By General Practitioners	Total	At Regional Hospital Board Homes	At other Con't *Homes	
46	56	102	64	8	30

* At the cost of Voluntary Organisations.

Sixteen of these cases were also advised or assisted with other social problems, and sixty-six home visits were made by the County Almoners during the year in connection with this aspect of their work.

Venereal Diseases.

Treatment of County Cases at all Centres.

The number of cases resident in the County who were dealt with for the first time during each of the years 1944-1950, together with the attendances made by all County cases at approved Treatment Centres up to 1948, according to returns received from the Mansfield, Worksop, Nottingham and Out-County Centres, were as follows :—

Year	No. of Cases Dealt with for the First Time.						Total Attendances (All Cases)
	Syphilis	Gonorrhoea	Soft Chancre	Total Venereal Infections	Non- Venereal and Undiagnosed Conditions	Grand Total	
1944	121	300	6	427	665	1,092	23,025
1945	159	340†	6	505	722	1,227	24,433
1946	227	445	7	679	856	1,535	24,791
1947	148	237	12	397	677	1,074	17,449
1948	162	243	10	415	844	1,259	17,194
				<i>Other Conditions *</i>			
1949	158	221		779		1,158	— *
1950	95	148		814		1,057	— *

* Amended form of Ministry of Health Return.

†Correction of mis-print "349" in previous Reports.

Source and Contact Tracing.

By arrangement with the Sheffield Regional Hospital Board the follow-up work which was undertaken under Regulation 33B until 31st December, 1947, was continued during 1950 by the Council's Almoners working in close collaboration with the Specialist Medical Officers at the Treatment Centres.

Miss K. M. Daly, who joined the Council's Almoner staff in October, 1949, resigned and left to take up a hospital appointment on 28th February, 1950. Efforts to obtain a successor to complete the Council's establishment of three Almoners were unsuccessful so that for the remainder of the year this service was one-third below strength. Eighty-seven visits were paid in connection with the follow-up of contacts and defaulters during 1950 and the following table gives particulars of the work undertaken in respect of cases referred to the Almoners for the first time during the year :—

	No. referred for the first time during the year	Number of visits paid	Number persuaded to attend	Number untraced	Number failed to attend
Contacts ..	4	10	3	—	1
Defaulters ..	27	47	21	—	6

Health Education.

Progress throughout the year has continued steadily. Unfortunately, owing to pre-Election activity at the beginning of the year, some eighteen meetings had to be cancelled and some film shows depending on the Central Office of Information films had to be abandoned. Similarly, sixteen meetings were cancelled owing to bad weather conditions mainly fog, at the end of the year. But for these losses the total numbers of talks and film shows would have shown a greater increase on the previous year.

A more satisfactory state is shown in the increased figure for the number of persons addressed, which shows that over two hundred more people attended the talks and film shows during the year.

These statistics are shown in the tables following and are some rough guide to the quantity of work being carried out. It is well to remember, however, that it is very much more difficult to assess the quality of the work. Frequent letters of appreciation for talks and other advice are received, as well as requests for repeated visits by lecturers, but these indicate the satisfaction of the hearers and are not evidence of the real value of Health Education. Plato said that "Wise men talk because they have something to say ; fools, because they have to say something," and this should be borne in mind when Health Education is the theme. It has also been said by Mark Twain, with

considerable wisdom, that “ Soap and education are not as sudden as a massacre, but they are more deadly in the long run.”

These two quotations apply admirably to much Health Education, for are we always sure of the quality of the advice so freely given? Surely here lies the distinction between mere propaganda and health teaching—for teaching it must be. How right Twain was when the effect of cheap slogans is considered, how damaging they may be! Let us be critical of the advice we give audiences, let us progress slowly and firmly on a basis of truth and not of expediency; then Health Education may be said to be a force for good.

It is so often argued that the main object of Health Teaching should be the child, that there is a tendency in some places to regard the school as the only vehicle for Health Education. Perhaps the words of Joubert, the eighteenth-century French moralist, may apply, when he says “ Children have more need of models than of critics.” If we alter the word “ critics ” for “ words ” the quotation is even more apt. Endeavour must be made to provide every possible opportunity for the parent to learn in order that Health Education may be taught in its best possible environment, the happy family.

Some analysis of the extensive range of work carried out through the year is shown in the tables which follow in this Report.

Approximate percentages of different talks subjects are as follows :—

Health Education (Aims and Methods)	..	..	5.9%
Growth in Child and Adolescent	..	..	8.8%
Maternity and Child Welfare	..	..	6.3%
Mental Health	..	..	8.5%
Sex Education	..	..	9.8%
General Health	..	..	27.0%
Prevention of Disease	..	..	24.4%
Environmental Health	..	..	1.7%
Publicity	..	..	7.6%

From the above table of percentages it will be seen that roughly sixty-six per cent. of the talks have been concerned with the positive aspects of Health, some twenty-six per cent. with the Prevention of Disease, and about eight per cent. with Publicity of the Health Services.

The tables appended show some analysis of the year's work.

TABLE 1.

Meetings.

Total number of Meetings	..	..	257
Do. Talks	..	..	237
Do. Exhibitions	..	..	4
Do. Film Shows	..	..	16
Do. Talks illustrated by Films	..	..	43

TABLE 2.

Audiences.

AUDIENCE			PERSONS ADDRESSED	ATTENDANCES
Women	..	..	4,282	7,166
Men	..	..	783	1,135
			<u>5,065</u>	<u>8,301</u>
Girls	..	..	166	189
Boys	..	..	97	110
			<u>263</u>	<u>299</u>
Females	..	..	4,448	7,355
Males	..	..	880	1,245
			<u>5,328</u>	<u>8,600</u>

TABLE 3.
Distribution of Meetings.

AREA	NUMBER OF MEETINGS	PERSONS ADDRESSED	ATTENDANCES
BOROUGHES			
Mansfield	6	107	122
Newark	4	139	139
East Retford	1	60	60
Worksop	1	29	29
URBAN DISTRICTS ..			
Arnold	1	47	47
Beeston and Stapleford	37	756	1,746
Carlton	6	115	215
Eastwood	14	269	451
Hucknall	22	347	500
Kirkby-in-Ashfield ..	8	211	539
Mansfield Woodhouse ..	4	28	76
Sutton-in-Ashfield ..	19	222	457
Warsop	—	—	—
West Bridgford ..	7	380	380
RURAL DISTRICTS			
Basford	16	529	673
Bingham	12	331	388
Newark	5	262	314
East Retford	8	388	388
Southwell	11	285	380
Worksop	18	167	468
WHOLE-COUNTY ORGANISATIONS	57	656	1,228
TOTALS ..	257	5,328	8,600

TABLE 4.

Talks.

Total Talks to Women	..	..	..	..	144
Do. Men ..	..	..	..	..	9
Do. Mixed Adults	..	..	..	..	75
Do. Girls ..	..	..	..	..	1
Do. Boys ..	..	..	..	..	1
Do. Mixed Youth	..	..	..	..	7
Do. Mixed Adults and Youth			..	..	—
TOTAL					237

TABLE 5.
Film Shows.

Total Film Shows to Women	..	..	..	..	12
Do. Men	..	..	..	..	—
Do. Mixed Adults	..	..	..	..	4
Do. Girls	..	..	..	..	—
Do. Boys	..	..	..	..	—
Do. Mixed Youth	..	..	..	..	—
Do. Mixed Adults and Youth	..	..	..	..	—
TOTAL					16

Films were shown to illustrate talks as follows :—

At Talks to Women	..	..	..	..	..	18
Do. Men	..	..	..	..	..	1
Do. Mixed Adults	..	..	..	..	..	22
Do. Girls	..	..	..	..	..	—
Do. Boys	..	..	..	..	..	—
Do. Mixed Youth	..	..	..	..	..	2
Do. Mixed Adults and Youth	..	..	..	..	..	—
TOTAL						43

TABLE 6.
Lecturers' Summary.

LECTURER.	NUMBER OF MEETINGS	PERSONS ADDRESSED	ATTENDANCES
Mr. A. H. Marrow	111	2,617	3,671
Mr. N. S. Wass	33	668	709
Dr. I. Powell Heath	35	1,170	1,285
Mr. D. L. Hughes	1	132	132
Dr. C. W. W. Jeremiah	2	132	132
Dr. M. B. Black	1	58	58
Dr. A. R. Margetts	11	185	222
Mr. D. E. Mason	5	138	163
Dr. L. F. McWilliams	3	81	81
Mr. W. L. Richardson	2	17	17
Mr. F. Wrigley	4	80	80
Mr. G. H. Earnshaw	1	132	132
Miss M. K. Collins	2	15	30
Miss A. Collishaw	13	49	324
Mr. G. S. Culley	1	24	24
Film Shows	16	407	515
Exhibitions	4	—	332
Home Help Service Talks	12	592	592

Internal Lecturers.

I am grateful to the following members of my Staff for the generosity with which they have placed their expert services at the disposal of the Health Education Service by giving talks in their free time during this year :—

Dr. C. W. W. Jeremiah, Dr. M. B. Black, Dr. A. R. Margetts, Mr. D. E. Mason, Dr. L. F. McWilliams, Mr. W. L. Richardson, Mr. F. Wrigley, Mr. G. H. Earnshaw, Miss M. K. Collins, Miss A. Collishaw, and Mr. G. S. Culley.

This work has been carried out in an honorary capacity.

TABLE 7.

Talks Subjects.				No. OF TALKS
<i>Health Education</i>				
Health Education, its Importance	..	..		2
Health Education in the Home	..	..		7
Health Education and the Nurse	..	..		1
Health in Industry	..	..		1
Parents' Responsibility for the Child's Health	..			3
				—
				14
				==
<i>Growth in Child and Adolescent.</i>				
Problems of Growth in the Child	..	..		3
Growth in Adolescence	..	..		11
Physical Needs of the Child	..	..		7
				—
				21
				==
<i>Maternity and Child Welfare.</i>				
Health of the Infant	..	..		11
Health during Pregnancy	..	..		2
Recent Advances in Obstetrics	..	..		2
				—
				15
				==
<i>Mental Health.</i>				
Mental Needs of the Child	..	..		7
Keeping the Child's Mind Healthy	..	..		4
The Difficult Child	..	..		5
Juvenile Delinquency	..	..		2
Mental Health of the Adult	..	..		1
The Mental Health Worker	..	..		1
				—
				20
				==

Sex Education.

NO. OF TALKS

Physiology of Sex and Reproduction	..	..	5
Sex Education	..	..	10
Sex Hygiene	..	..	3
Health during the Menopause	..	..	5
			23

General Health.

General Fitness	..	..	19
Rest and Relaxation	..	..	15
Posture and Care of the Feet	..	..	14
Care of the Skin	..	..	1
Glands and Hormones	..	..	2
Food and Health	..	..	4
Health in Winter	..	..	2
Dental Health	..	..	4
Exercise in the Elderly	..	..	1
Nutrition and Accidents	..	..	2
			64

Prevention of Disease.

Food and Drink Infections	..	..	22
Kitchen Hygiene	..	..	15
First Aid in the Kitchen	..	..	4
The Infectious Diseases	..	..	5
Influenza and the Common Cold	..	..	2
Rheumatism	..	..	6
Recent Advances in Medicine	..	..	4
			58

Environmental Health.

Sewage Disposal	..	..	2
Health and Water Supply	..	..	2
			4

Health Services Publicity.

The National Health Service	..	..	2
The Local Health Services	..	..	3
The Home Help Service	..	..	12
The School Health Service	..	..	1
			18

TABLE 8.
Films Used.

TITLE OF FILM	TIMES USED
Your Children's Sleep	10
Your Children's Eyes	5
Your Children's Ears	2
Your Children's Meals	1
Your Children's Teeth	4
Your Teeth	8
Your Children and You	1
Children Learning by Experience	1
Children Growing Up	3
Children of the City	1
Sex in Life	6
Human Reproduction	7
Growing Girls	7
Old Wives' Tales	2
Modern Guide to Health	6
Your Very Good Health	2
One Man's Story	2
Birthday	1
The Centre	1
Northumberland County Council Dental Services	2
Round Figures	6
The Louse	1
Unwelcome Guests	1
Another Case of Food Poisoning	4
Fly about the House	3
Town Rats	2
Defeat Tuberculosis	1
Defeat Diphtheria	2
Penicillin	2

TABLE 9.
Leaflets and Posters.

From a stock of approximately ninety carefully-selected leaflets and twenty-five posters the following have been distributed at talks and film shows and at Welfare Centres.

Leaflets.	
Sex Education	4,820
Maternity and Child Welfare	4,459
General Health	6,727
Food	3,924
Disease Vectors	10,494
Tuberculosis	1,764
Influenza and Cold	2,600
Poliomyelitis	4,599
Immunisation and Vaccination	759
	40,146

Posters.

Immunisation and Vaccination	..	..	..	34
Coughs and Colds	..	..	..	28
Disease Vectors and Food Infection	..	..	..	77
Food	..	..	..	39
				178

DOMESTIC HELP SERVICE (Section 29).

Further links in the chain of Sub-Offices comprising the County Home Help Service were completed with the opening of a Sub-Office at Newark on the 5th June, and one at Retford on the 1st August. In both these Boroughs, suitable accommodation has been rented in the respective Town Halls from the Borough Councils. As a result of this development, it is now possible to help more cases in the extensive Rural Areas in the North and East of the County and the Southwell Rural District. It is anticipated that there will always be difficulties in these districts owing to somewhat inadequate transport.

Much publicity has been undertaken during the year in order that the Service may be brought to the notice of those in need of domestic help. Talks have been given to Women's Institutes, Church Organisations and Old People's Clubs, articles have been published in the local press and in some districts particulars of the Service have been inserted, by permission of the local Food Officers, in the grey ration books issued to expectant mothers.

It has been found necessary to increase the standard charge for the Service and this was raised from 1s. 10d. to 2s. per hour from the 31st July. The rate of pay to Home Helps remains at 1s. 9d.

A popular innovation has been a talk to Home Helps arranged under the Health Education Scheme in each district on "How to Guard Against Infection," dealing with the clean handling of food in the home. Home Helps attended in their own time and have asked for further lectures to help them in their work.

At the end of the year, the establishment consisted of thirty-six full-time Home Helps, one hundred and ninety-one part-time Home Helps and an administrative staff of eight Sub-Organisers, nine Case-Workers and the County Organiser.

The general expansion of the Service is shown by an increase of 726 in the number of cases served during the previous year.

Cases Served.

MATERNITY	GENERAL	TUBERCULOSIS	TOTAL	TOTAL HOURS OF SERVICE
519	1,139	23	1,681	191,454

MENTAL HEALTH SERVICE (Sections 28 and 51).

Administration.

The Mental Health Service is administered by the Mental Health Sub-Committee of the County Health Committee which consists of twelve members of the County Council, three District Council representatives, and three co-opted members with special experience of mental health work, and meetings are held quarterly.

Staff.

(a) *Medical.*

The County Medical Officer is responsible for the organisation, control, and medical direction of the Service, and these duties are carried out through the Mental Health Section of the Public Health Department.

It has still not proved possible to secure the appointment of an Assistant Medical Officer for Mental Health and my Deputy, Dr. C. W. W. Jeremiah, continued during the year to act as general adviser on Mental Health matters and to undertake the clinical work involved. In addition to medical examinations in connection with ascertainment, furnishing of certificates in support of petitions, submission of medical evidence concerning defectives dealt with by the various Courts throughout the County, and various other examinations and reports, Dr. Jeremiah also undertook on behalf of the Institutions concerned the medical examination of patients on licence in the County and the preparation of reports in connection with re-consideration of Orders, applications for discharge from Order, and the review of cases required after two years on licence. Nevertheless, the absence of a full-time Assistant Medical Officer for Mental Health continues to be a handicap to the further development of the Service. The post has been advertised on several occasions and there is no doubt that the dearth of applications from suitably qualified and experienced applicants is due almost entirely to the disparity between the salary scales applicable to specialist posts in the Hospital Service and those fixed in relation to appointments made by Local Health Authorities.

(b) *Non-Medical.*

The following non-medical staff of my Department are employed on administrative and statutory duties in the Mental Health Service :—

- (i) a male Mental Health Officer ;
- (ii) a female Superintendent Mental Health Worker ;
- (iii) a female Mental Health Worker ;
- (iv) ten part-time male Mental Health Workers (also employed half-time as District Welfare Officers) ;
- (v) a male Assistant Mental Health Worker and District Welfare Officer for relief duties ;

(vi) Mansfield Occupation Centre staff :—

One Instructress ;
 One Assistant Instructress ;
 One female Trainee ;
 Two part-time female Escorts ;

(vii) Two female Home Teachers ;

(viii) Two clerks and a shorthand typist.

There are vacancies on the approved establishment for two female Mental Health Workers.

Co-ordination with Regional Hospital Boards.

Continued co-operation has been maintained during the year between my Department, the Sheffield Regional Hospital Board, and the Officers of the various Hospitals and Institutions to which patients from the County have been admitted. My Officers have continued to exercise regular supervision of mental defectives sent on licence to the County area and, in addition to the bi-monthly progress reports submitted in this connection, numerous other reports on home conditions have been prepared on behalf of Hospital Management Committees in respect of applications for licence, holiday leave and discharge from Order, and re-consideration of Orders by the Visitors. My Deputy has also undertaken medical examinations whenever requested to do so. No charge is made for these services.

In the sphere of mental illness, the Authority's Mental Health Workers make use of the established Psychiatric Out-patient Clinics whenever possible because it is at this level that co-operation and interchange of information are most effective. A report on the background of each case referred is prepared for the information of the Psychiatrist concerned who, in turn, advises the Mental Health Worker as to the most appropriate course of action. Liaison is also closely maintained when arranging the actual admission of patients to hospital and the Mental Health Workers have full regard to the existing shortages of accommodation and nursing staff.

Voluntary Associations.

The Local Health Authority have not delegated any of their statutory duties to Voluntary Bodies although advantage is taken from time to time of the special services provided by the National Association for Mental Health, particularly in regard to the training of staff. An annual grant is made to this Association by the County Council.

Training of Mental Health Workers.

A third residential course in Mental Health was held at the Sheffield University in July, 1950, and was attended by the two officers from this Authority who had not been present at either of the previous courses, course fees and expenses being paid by the Council. With the

exception of the recently appointed female Mental Health Worker, all the Authority's Authorised Officers have now attended one of these courses and have derived considerable benefit both from the instruction given and the opportunity afforded them to discuss mutual problems with officers from other parts of the country.

The Superintendent Mental Health Worker attended the annual conference of the National Association for Mental Health held in London in March, 1950, and also the Annual Conference of the Association of Mental Health Workers at Scarborough. The Assistant Instructress at the Mansfield Occupation Centre attended a week's refresher course for Staffs of Occupation Centres which was held in London during April.

Work undertaken in the Community.

Section 28, National Health Service Act, 1946.

Prevention of Illness, Care and After-Care.

Although the prevention of mental illness is dependent upon factors over which the Mental Health Worker can ordinarily have little or no control, much can be done in the early stages of illness to prevent the more serious consequences, both by ensuring that the patients coming to notice are afforded the opportunity for early treatment and by helping them to deal adequately with problems which confront them in their everyday life. The fullest use is made of the Psychiatric Out-patient Clinics established in the County and the Mental Health Worker co-operates with the Psychiatrist, who advises upon the course of action which he considers to be most appropriate to the needs of each patient. There is also close consultation between the Authority's Mental Health Workers and general medical practitioners—who do not hesitate to make use of the Health Workers' knowledge of the various social services which can be brought into play in the solution of the domestic and occupational difficulties encountered by the mentally ill.

In the sphere of after-care, a relatively small proportion of cases discharged from hospital are referred to the Local Health Authority, mainly because the Saxondale Hospital employs its own Psychiatric Social Workers who undertake the follow-up of patients discharged. Nevertheless, cases do come to notice from other Hospitals and it has proved possible to afford material assistance to patients by helping them to obtain the type of employment best suited to their condition; by advising them as to the financial benefits available to them and the alleviation of their domestic difficulties or, sometimes, by merely being available to listen to their troubles and lending them moral support in their re-adjustment to life in the community. During 1950, fifty-nine cases were referred to the Local Health Authority for after-care, all of whom were visited at least three times, and more often when it was considered necessary. In addition, the Mental Health Workers were instrumental in assisting a number of other patients during the year who approached them quite voluntarily on discharge from hospital.

As indicated elsewhere in this report, the supervision of mental defectives in the community is undertaken by the Authority's Mental Health Workers. Patients under statutory supervision are normally visited at two-monthly intervals, whilst quarterly visits are paid to those under voluntary supervision. Patients on licence from institutions are also visited periodically on behalf of the Hospital Management Committees concerned, whilst those remaining under guardianship are supervised by the Superintendent Mental Health Worker and the female Mental Health Worker. All possible assistance is given in dealing with problems affecting patients' welfare and there is close liaison with the Youth Employment Service, the Ministry of Labour, the National Assistance Board, and the various other statutory and voluntary Bodies who provide services which can affect the well-being of the mental defective. Worthy of mention is the arrangement whereby the Ministry of Labour and National Service is kept informed of those male defectives who would otherwise be required to register for national service, and the co-operation with local Food Offices to ensure that mentally defective children excluded from school attendance can be supplied with milk at the specially reduced price.

Reference was made last year to the arrangements for the provision through the Council's general scheme for the Prevention of Illness, Care and After-Care of nursing equipment and appliances to defectives having a physical deformity or ailment, and these arrangements were continued in 1950. As, however, it is implicit in the scheme that such articles are provided to meet a temporary need, it was decided that applications for the provision of wheel chairs, spinal carriages, or other major appliances for the use of defectives suffering some *permanent* physical handicap should properly be dealt with through the Specialist Services provided by the Ministry of Health, and arrangements were made accordingly. At the same time, the County Council continued to supply this type of equipment on loan pending permanent provision by the Ministry of Pensions acting as agents for the Ministry of Health, and were thus able to prevent any hardship which might have been caused by delay in delivery of the permanent appliance.

The Section of the report dealing with the Mental Deficiency Acts gives further information concerning the work undertaken on behalf of defectives in the community, including details of the training provided through the Home and Group Teaching Service and the Mansfield Occupation Centre.

Lunacy and Mental Treatment Acts, 1890-1930.

The following figures summarise the work undertaken by the Local Health Authority's Duly Authorised Officers during the year in securing treatment for persons suffering from mental illness :—

<i>Admissions to Hospital</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
(a) Mental Treatment Act, 1930—			
As Voluntary Patients (Section 1)	25	29	54
As Temporary Patients (Section 5)	—	3	3
(b) Lunacy Act, 1890—			
Under Summary Reception Orders			
(Section 16)	71	120	191
Under 3-day Orders (Section 20) ..	27	28	55
Under 14-day Orders (Section 21)	1	—	1
Referred to Psychiatric Out-Patient Clinics	31	26	57
	155	206	361

It will be seen that by far the largest number of admissions took place under Summary Reception Orders and it is worthy of special notice that only fifty-seven voluntary patients were admitted by the Authority's officers during the year as compared with ninety-five in 1949. This is due in part to the fact that, as the facilities available became more widely known, medical practitioners referred more patients direct to Psychiatric Out-Patient Clinics where arrangements were made for their direct admission to Hospital, thus avoiding the need for the assistance of the Duly Authorised Officers. There is no doubt, however, that an acute shortage of hospital accommodation also played its part in restricting the number of patients dealt with in this way and, when so much publicity has been given to the benefits of early treatment, it is to be regretted that the facilities available are not adequate to meet the need. Many of the difficulties now being experienced could be overcome if some alternative accommodation could be made available for senile patients who are blocking beds in mental hospitals which could otherwise be used for the treatment of younger patients with better prospects of recovery. Every effort is made, in consultation with general practitioners, patients' families, and mental hospital staffs, to restrict the number of old persons admitted, but the social urgency so frequently attaching to this type of case very often makes it imperative to employ certification as the means of securing the necessary hospital care. Some of the patients so dealt with are, of course, discharged eventually, but many who might otherwise be discharged continue to occupy mental hospital beds because their families are either unable or unwilling to have them home again.

The following age group summary shows the number of aged persons in the County who were dealt with under the Lunacy Act in 1950 :—

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Aged 65-70 years	10	10	20
„ 71-80 years	6	14	20
„ 81 years or over	3	2	5
	19	26	45

Contrary to the practice adopted by some other Authorities who make wide use of the 3-day Order, it is used in this County only when the circumstances of a case are such as to comply explicitly with the requirements of Section 20 of the Lunacy Act and, unless it is necessary for a patient to be placed under immediate care and control, one of the other methods of admission is adopted. It is true, of course, that the use of the 3-day Order and its subsequent extension for fourteen days can often obviate the need for certification and, where alternative 'designated' accommodation is available, the necessity for admission to a mental hospital, but the position in this County is such that although certain other hospitals have been designated for the reception of 3-day Order patients adequate facilities for dealing with such cases are available only at the Saxondale Hospital. Consequently, it is always necessary to have regard to the Hospital's accommodation problems and at the Medical Superintendent's request Duly Authorised Officers have been instructed to exercise the utmost discretion in their use of this method of admission. Of the fifty-five patients so admitted in 1950, fourteen were subsequently certified; thirty-three became voluntary patients; four were able to take their discharge and there were four deaths.

Owing to structural alterations at the Saxondale Hospital early in the year which necessitated a temporary ban on admissions, County patients had to be diverted to the Mapperley Hospital which normally serves the City of Nottingham and the ready co-operation of the Medical Superintendent of the latter Hospital at this time did much to prevent the development of a most serious situation.

Mental Deficiency Acts, 1913-38.

(i) General Administration.

The statistical summary which follows includes under the main headings given the figures of work accomplished during the year :—

Number of new cases reported during the year	..	96
Total number of old cases verified and new cases reported since the re-organisation of the Service in 1933	..	3,312
Total number of all known defectives in the County on 31st December, 1950	.. .. .	*3,654
Incidence of all known defectives per 1,000 of the population	.. .. .	6.84
Number under statutory supervision on 31-12-1950	..	600
Number under voluntary supervision on 31-12-1950	..	728
Number "subject to be dealt with" awaiting removal to an institution at 31-12-1950	.. .. .	168
Orders made during the year :		
Institution	.. .. .	39
Guardianship	.. .. .	3
Varying Orders—from Guardianship to Institution	..	3
from Institution to Guardianship	..	1
Varying Guardian	.. .. .	1
Place of Safety Orders	.. .. .	11

Number discharged from Order during the year :

Guardianship	..	..	..	..	79
Institution	..	..	..	..	24
Number under Guardianship on 31-12-1950	..	..	..	..	41
Number on books of Institutions on 31-12-1950	..	..	..	..	473
Number in Places of Safety on 31-12-1950	..	..	..	..	1

Mansfield Occupation Centre (26 cases on Register on 31-12-1950)—

Attendances during 1950	..	..	..	4,336
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Home and Group Teaching—

(a) Group Centres

Sessions held during year	..	..	..	160
Total attendances	..	..	..	712

(b) Individual Home Visits :

Number of visits paid during year	..	..	754
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*Includes 1,467 still within the purview of the Local Education Authority.

(ii) *Ascertainment.*

As indicated in the foregoing statistical summary, ninety-six new cases were reported during the year and, in addition, two male defectives previously under voluntary supervision were formally reported by the Local Education Authority, giving a total of ninety-eight as follows :—

				M.	F.	T.
(a)	Cases reported by Local Education Authority (Section 57, Education Act, 1944) :					
	Under Section 57(3)	..	..	14	13	27
	Under Section 57(5)	..	..	19	13	32
(b)	Other cases reported during 1950 and found to be ' subject to be dealt with '	..	..	5	4	9
	Total cases ascertained to be ' subject to be dealt with ' during the year	..	..	38	30	68
(c)	Other cases reported during 1950 who were not ' subject to be dealt with '	..	..	12	18	30
				50	48	98

These cases were dealt with in the following manner :—

(d) Cases ascertained to be ' subject to be dealt with ' :

Admitted to Institutions (by Order)	..	*	1	2	3
Placed under Guardianship	..		1	1	2
Taken to " Places of Safety "	..		1	—	1
Placed under Statutory Supervision	..		13	9	22
Died or removed from area	..		—	4	4
Action not yet taken at 31-12-1950	..		21	13	34

(e) Cases not at present ' subject to be dealt with ' :

Placed under Voluntary Supervision	..		10	12	22
Died or removed from area	..		—	2	2
Action unnecessary	..		2	4	6
			50	48	98

*This patient had previously been detained in a Place of Safety.

Due to a shortage of Assistant Medical Staff in the School Health Service the number of cases statutorily reported by the Local Education Authority under Section 57 of the Education Act, 1944, was less than the figure for the previous year (fifty-nine as compared with sixty-seven in 1949). The number brought to notice from other sources also showed a decrease from fifty-five in 1949 to thirty-nine in 1950. The fact that the number of newly reported cases was more than offset by the numbers who died, removed to other areas, etc., coupled with the increase in the estimated mid-year population, resulted in a slight fall in the ratio of cases ascertained by the Local Health Authority per thousand of the population from 4.02 per thousand in 1949 to 3.89 per thousand at the end of 1950. Including cases still within the purview of the Local Education Authority, however, the ratio was increased from 6.75 in 1949 to 6.84 in 1950, and this compares favourably with the Wood Committee's estimate of eight per thousand.

The School Health and Mental Health Sections of the Public Health Department continued to maintain close co-operation during the year in matters affecting the two Services, whilst a number of new cases were again brought to notice by Clerks to Justices, Police and Probation Officers following Court appearances.

Other sources of ascertainment during 1950 included the County Welfare Service, the Southwell Diocesan Board of Moral Welfare, patients' relatives and medical attendants, and other Local Health Authorities, whilst several cases came to notice following their attendance at Psychiatric Out-patient Clinics.

(iii) *Guardianship.*

Three Orders for Guardianship were made during the year, one by a Court of Summary Jurisdiction in respect of a male patient charged with an offence, and two in respect of female patients following the presentation of petitions.

Varying Orders were obtained for the transfer of three defectives (one male and two females) from Guardianship to Institution care, for the transfer of a female patient from Institution care to Guardianship and, in the case of another female defective, for the appointment of a new Guardian.

Consequent upon the transfer to the National Assistance Board of responsibility for the payment of maintenance allowances to defectives under Guardianship, to which reference was made in the last Report, the Board of Control accepted the Local Health Authority's recommendations as to cases considered suitable for discharge from Order and seventy-three patients were discharged in this way during 1950. The Board also agreed to the withdrawal of the authority for detention in respect of a male patient who had been placed under Guardianship by his father. Orders were allowed to lapse in four other cases who were considered suitable for discharge and in another case (now admitted to Institution care) the Order was discharged 'by operation of law' for technical reasons. A male patient under Guardianship died in 1950 shortly after his transfer to a Mental Hospital under the provisions of the Lunacy Act, 1890.

The number of patients remaining under Guardianship at 31st December, 1950, was forty-one, made up as follows :—

(i) Under parental guardianship	..	..	..	10
(ii) Under guardianship of a relative other than a parent				28
(iii) Under guardianship of a non-relative	..		..	3
				—
				41
				==

In accordance with previously approved arrangements the Local Health Authority continued to make an allowance of 5/- weekly to the Guardian of each patient in category (ii) above and 7/6 weekly to the Guardians of those patients in category (iii) in recognition of their services. These allowances were, of course, in addition to the standard maintenance grants made by the National Assistance Board. The County Council continued to make maintenance and clothing allowances in respect of four patients who were in receipt of a higher allowance than was payable by the Assistance Board, and to one patient under the age of sixteen years.

Assistance with holiday travelling and maintenance expenses was afforded in appropriate cases during the year and, in one case, the County Council defrayed the cost of a patient's treatment by a Chiroprapist as this treatment could not be obtained free of charge under the National Health Service Act.

During the year proceedings were taken against the father of a feeble-minded female patient under her mother's statutory guardianship for alleged incest with the patient but the father committed suicide before the case could be brought to trial.

The patient was removed to institutional accommodation immediately after the incidents complained of, but she was permitted to return home on the father's death and she continued to reside there under Guardianship.

The periodic visitation of patients under Guardianship continued to be undertaken during the year by the Superintendent Mental Health Worker.

(iv) *Supervision.*

The male Mental Health Workers continued during the year to carry out the routine visitation of defectives under Statutory or Voluntary Supervision in their own homes and the Superintendent Mental Health Worker exercised a general oversight in this respect and gave advice and help in any case presenting particular difficulties. During the year, the Mental Health Workers made approximately 5,000 domiciliary visits and, although the majority of these were of a routine nature where the behaviour and care of the defectives concerned was entirely satisfactory, it was possible in many instances to render assistance with problems causing concern in the home.

During the year, the names of two male and four female patients were removed from the list of cases under Statutory Supervision on the grounds that they had demonstrated by their stable conduct in the community over a period of years that continued supervision was unnecessary. Visitation was also discontinued during the year in respect of twenty-five defectives (fourteen males and eleven females) formerly under Voluntary Supervision.

The numbers of patients remaining under supervision on 31st December 1950, were as follows :—

			<i>Males</i>	<i>Females</i>	<i>Total</i>
STATUTORY SUPERVISION :					
Under 16 years of age	..	..	82	63	145
Aged 16 years and over	..	..	282	173	455
VOLUNTARY SUPERVISION :					
Under 16 years of age	..	..	2	1	3
Aged 16 years and over	..	..	358	367	725
			724	604	1,328

(v) *Training.*

(a) *Occupation Centre.*

The existing arrangements for the provision of occupation and training through the Occupation Centre conducted at the Folk House, Westfield Lane, Mansfield, were continued during the year.

The number of patients attending at the end of the year was twenty-six (thirteen males and thirteen females) and attendances totalled 4,336 out of a possible 5,530 ; an average attendance of approximately 78%.

Defectives attending the Centre receive milk daily under the " Milk in Schools " scheme, and travelling expenses are paid by the County Council. Where it is impracticable for escorts to be provided by the Centre, the Council also pays the travelling expenses of relatives acting as escorts. Two parties were given at Christmas for the defectives and their relatives and a grant was made by the County Council towards the cost.

At the end of the year, the staff consisted of an Instructress, an Assistant Instructress, a Female Trainee and two part-time female Escorts. The Trainee was appointed with a view to her ultimate attendance at one of the appropriate Courses organised by the National Association for Mental Health so that another qualified Teacher may be available when it is possible to open the proposed new Centre at Mansfield. In this connection, it is pleasing to report that the Ministry of Health have now intimated (September, 1951) that the scheme for the building of the new Centre may proceed and it is to be hoped as a result that it will soon be possible to cater for the training needs of all the defectives in Mansfield and the surrounding Urban areas.

It is recognised, of course, that Occupation Centres are required in other parts of the County but present day economic and building restrictions and the difficulty of finding suitable premises for rent have so far prevented any rapid expansion in this direction. Proposals are at present under consideration for the provision of Occupation Centre facilities for defectives living in the Urban Districts surrounding Nottingham.

(b) *Home and Group Teaching.*

The ten group teaching centres referred to in my last Report commenced to function during May, 1950, and the two Home Teachers also paid a number of fortnightly visits to other defectives in their own homes as shown in the following summary :—

Group Centres :

Number on Register at 31-12-1950	..	..	..	50
Sessions held in 1950	..	..	..	160
Total attendances	..	..	..	712

Individual home visits :

Numbers being visited at 31-12-1950	..	..	50
Number of visits in 1950	..	..	754
Hours of instruction given	..	..	684

Parents have welcomed the group centres, not only for the temporary relief from " patient care " which they provide, but also because they see in them a positive effort to provide training. The family group idea is inherent in group centre work as a result of the variation in the ages of those attending, and the patients enjoy the sessions not only for their companionship but also for the added interest which is thus brought into their otherwise uneventful lives. Many of them have shown marked improvement as a result of the instruction given and, although it cannot be said that these fortnightly centres are an adequate substitute for full-time Occupation Centre training, the results so far achieved have justified their establishment.

(vi) *Licence.*

According to information supplied by the various mental deficiency institutions throughout the country, the number of Nottinghamshire patients on licence on the 31st December, 1950, was sixty (twenty-four males and thirty-six females) of whom twenty-four (eight males and sixteen females) were residing within the County area.

The Authority's Mental Health Workers continued to undertake on behalf of Hospital Management Committees the routine supervision of patients on licence in the County and rendered assistance to patients newly sent out on licence in their re-adjustment to life in the community and, where appropriate, in finding suitable employment. During the year progress reports on individual cases were forwarded to Institutions at two-monthly intervals and a number of other reports have been supplied as shown in the following summary :—

Progress Reports	156
Reports on applications for holiday leave	37
Do. for licence	12
Do. for discharge from Order ..	4
Bi-ennial review special reports (including medical reports and recommendations as to suitability for discharge)	9

In addition to the foregoing, all necessary arrangements were made for the re-consideration by the Visitors during the year of the Orders in respect of six male defectives on licence in the County, thus obviating the need for the patients to be returned to the respective institutions for this purpose. At the request of the National Association for Mental Health, the County Council also agreed that the Deputy County Medical Officer might complete the Special Reports and Certificates required in connection with the re-consideration of the Orders of patients placed on licence at the Tuxford Agricultural Hostel, and this was done in six cases during the year. In a further case, a special report was completed following a patient's application for discharge from Order.

(vii) *Institution Care.*

In addition to the three patients (one male and two females) admitted as a result of Varying Orders from Guardianship, and a female patient placed in an institution by her parent under Section 3 of the Mental Deficiency Act (with the assistance of the Authority's Officers), Orders were made for the admission of thirty-eight patients (eighteen males and twenty females) to Institutions during the year. Of that number one Order in respect of a male defective was made by H.M. Secretary of State, and thirty-seven by Judicial Authorities following the presentation of petitions. Ten of these last-mentioned cases (nine males and one female) had previously been detained in places of safety and in two other cases Orders were obtained to replace previous Orders which had lapsed 'by operation of law.'

One female and ten male defectives were admitted to 'places of safety' during the year—seven males under Court Orders and the remainder at the instance of the Local Health Authority's authorised officers. A male patient removed by the Authority's Officers returned to his home following improvement in the home conditions.

Twenty-four defectives (eight males and sixteen females) were discharged from Order during the year and there were seven deaths (five males and two females). The total number remaining on the books of institutions on 31st December, 1950, was 473, made up as follows :—

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Thirteen institutions in the area of the Sheffield Regional Hospital Board..	77	174	251
Twenty-eight institutions outside the Sheffield Region	120	79	199
Rampton and Moss Side Hospitals for Mental Defectives	14	9	23
	211	262	473

On the 31st December, 1950, the ratio of defectives in Institutions per thousand of the population of the County, excluding defectives on licence, was 0.78 as against 0.32 at the end of 1933.

Reports for the information of the Visitors were completed by the Authority's Mental Health Workers on behalf of Hospital Management Committees in respect of 165 cases whose Orders became due for re-consideration during the year.

On the 31st December, 1950, the number of defectives 'subject to be dealt with' for whom institution accommodation was required totalled 168 (85 males and 83 females), including 64 (36 males and 28 females) under the age of sixteen years. Of the total number, no less than fifty defectives were considered to be in real and urgent need

of removal and whilst the figures given may not appear impressive it has to be remembered that every case included in the 'real and urgent' category presents an almost overwhelming problem in its immediate family circle. One particularly serious problem associated with the shortage of accommodation concerns the delinquent defective. In their desire to ensure that their deliberations have full regard to the social limitations arising from a defective's mental condition, local Courts always co-operate closely with the Local Health Authority in cases where known or suspected defectives are concerned so that the fullest information may be available to them. Unfortunately, however, where it appears to a Court that it is necessary to prevent a defective's return to the community and that he should properly be dealt with under the Mental Deficiency Acts, the lack of immediately available accommodation in mental deficiency institutions impels the Court to make an Order for the defective's detention in a prison as a "Place of Safety" until such time as a petition can be presented, there being no other "Place of Safety" available.

The defective's relatives can be forgiven for regarding this procedure, entailing as it often does a prolonged stay in prison, as a purely punitive measure, and the obvious consequence is that detention in a prison might ultimately come to be regarded as a natural alternative to institution care, thereby bringing the Mental Deficiency Acts into disrepute and further hindering the efforts of those who attempt to administer the Acts with sympathy and understanding.

Since the inception of the National Health Service Act one of the most significant developments from the viewpoint of those concerned with the welfare of mental defectives has been the changed attitude of parents and other relatives. Whereas "mental deficiency" used to be regarded generally as something of a social stigma and a thing to be kept in the background, relatives are now only too anxious to take advantage of such facilities for supervision and training as are available. Moreover there seems to have been a general weakening of "family ties and responsibilities" and where families would once have accepted their misfortunes without complaint there is now—all too frequently—a clamour for the urgent removal of defective relatives. This is accounted for partly by an enlightened attitude towards mental deficiency and mental illness—a result of the publicity which the conditions have received—and partly by the removal of the obligation to make contributions towards the cost of a patient's institutional maintenance. Whatever the reason, the ever increasing demand has thrown an impossible burden on existing accommodation which cannot be eased until more is provided. It is encouraging to know, therefore, that the utmost stress is being placed on the need to give priority to the building of mental hospitals and mental deficiency institutions and it is to be hoped that the time is not far distant when it will be possible to meet all demands which arise. In the meantime, priority of admission has still to be afforded on the basis of home and environmental conditions rather than upon the clinical needs and potentialities of the defectives themselves. Even so, it is impossible to deal with more than a fraction of the cases of real urgency.

Ambulance Facilities for Mental Health Services.

The duty of securing means of transport for mental defectives or persons suffering from mental illness continues to be met mainly through the medium of the County Ambulance Service. Occasional use is also made of Mental Health Worker's private motor cars.

Male and female escort assistance is obtained as required and is paid for in accordance with an approved scale of fees. Subsistence allowances are also paid to Escorts where it is necessary for them to take meals whilst on escort duty.

If the assistance of trained nursing staff is required, the necessary help is sought from the appropriate hospital.

CONCLUSION.

I desire to express gratitude to the medical and senior lay staff who have contributed so greatly to the detailed preparation of this Report ; to Dr. Jeremiah, my Deputy, for his continued loyal and efficient service ; and to the staff generally, both indoor and outdoor, for their zeal and efficiency.

I also wish to thank the Medical Officers of Health of the County Districts for the information which they have so kindly supplied.

Again I gratefully acknowledge the support which I have received from the Chairmen and Members of my several Committees.

I am, Ladies and Gentlemen,

Your obedient Servant,

CHRISTOPHER TIBBITS.

STATISTICAL TABLES

BOROUGHES AND URBAN DISTRICTS.

BOROUGHES AND URBAN DISTRICTS	Area in Acres (Land and Inland Water)	Persons per Acre	Families or separate Occupiers at Census 1931	Persons per Family at Census 1931	*Population, Census 1931	Population estimated to the middle of 1930	Births			Deaths under 1 year of age		Deaths		Death Rate from Pulmonary Tuberculosis per 1,000 of population	Death Rate from ALL Tuberculous Diseases per 1,000 of population
							Number	Rate (Crude)	Rate (Corrected)	Number	Rate per 1,000 Live Births	Number	Rate (Crude)	Rate (Corrected)	
MANSFIELD (Borough)	7,009	7.2	11,082	4.0	46,068	50,960	834	16.3	15.8	29	34.8	573	11.2	12.3	0.43
WORKSOP (Borough)	17,936	1.8	6,320	4.1	26,285	32,410	575	17.7	18.9	21	36.5	292	9.0	10.8	0.25
NEWARK (Borough)	3,364	6.8	5,152	3.6	19,535	23,120	408	17.6	17.8	15	36.8	277	11.9	11.8	0.64
EAST RETFORD (Borough)	4,657	3.5	3,677	3.7	14,229	16,410	272	16.6	16.4	9	33.1	213	12.9	12.2	0.30
ARNOLD	4,506	4.7	3,766	3.8	14,325	21,340	318	14.9	14.3	10	31.4	221	10.3	11.2	0.28
BEESTON & STAPLEFORD ..	6,462	7.6	7,250	3.8	27,812	49,470	790	15.9	15.4	19	24.0	512	10.3	12.0	0.50
CARLTON	4,018	8.5	6,883	3.8	26,425	34,330	508	14.8	14.3	19	37.4	377	10.9	11.4	0.29
EASTWOOD	1,178	8.4	2,201	3.9	8,830	9,980	181	18.1	18.8	5	27.6	102	10.2	12.2	0.20
HUCKNALL	4,029	5.7	4,523	3.9	17,839	23,030	369	16.0	15.8	14	37.9	191	8.3	10.2	0.17
KIRKBY-IN-ASHFIELD ..	5,830	3.4	4,406	4.0	17,866	20,110	364	18.1	18.8	14	38.4	186	9.2	10.5	0.29
MANSFIELD WOODHOUSE ..	4,834	3.7	3,363	4.0	13,721	18,120	318	17.5	18.2	17	53.4	175	9.6	11.9	0.55
SUTTON-IN-ASHFIELD ..	10,507	3.8	9,151	4.1	37,725	40,300	667	16.5	16.7	34	50.9	447	11.1	13.0	0.37
WARSOP	7,174	1.5	2,478	4.4	10,959	11,020	200	18.1	18.3	7	35.0	100	9.1	11.5	0.36
WEST BRIDGFORD ..	3,501	7.0	5,515	3.4	19,209	24,600	318	12.9	12.9	7	22.0	295	12.0	9.8	0.12
TOTALS ..	85,005	4.4	75,767	3.9	300,828	375,200	6,122	16.3	16.3	220	35.9	3,961	10.5	11.5	0.35

*The figures under this heading relate to the population enumerated on the 26th April, 1931, but the Districts for which they are now given are as constituted at the 30th September, 1935, and include changes of area under the County of Nottingham Review Order, 1934, which came into effect on the 1st April, 1935, and the Nottingham Corporation Act, 1932, which came into effect on the 1st April, 1933.

TABLE II.

NOTTINGHAMSHIRE.
RURAL DISTRICTS.

Vital Statistics for the Year 1950.

RURAL DISTRICTS	Area in Acres (Land and Inland Water)	Persons per Acre	Families or separate Occupiers at Census 1931	Persons per Family at Census 1931	*Population, Census 1931	Population estimated to the middle of 1950	Births			Deaths under 1 year of age		Deaths			Death Rate from Pulmonary Tuberculosis per 1,000 of population	Death Rate from ALL Tuberculous Diseases per 1,000 of population
							Number	Rate (Crude)	Rate (Corrected)	Number	Rate per 1,000 Live Births	Number	Rate (Crude)	Rate (Corrected)		
BASFORD ..	71,571	0.69	10,434	3.9	41,303	49,800	830	16.7	17.0	26	31.3	506	10.1	10.4	0.28	0.30
BINGHAM ..	67,583	0.29	3,882	3.6	15,106	19,870	278	14.0	15.1	6	21.6	228	11.5	10.1	0.25	0.25
WORKSOP ..	28,515	0.57	3,348	4.3	14,555	16,470	295	17.9	18.1	5	16.9	147	8.9	11.3	0.54	0.60
EAST RETFORD ..	111,032	0.19	4,910	3.7	19,506	22,150	314	14.1	15.4	8	25.5	215	9.7	9.1	0.13	0.23
NEWARK ..	41,550	0.25	2,356	3.7	8,898	10,620	174	16.4	15.7	7	40.2	109	10.3	10.1	0.37	0.37
SOUTHWELL ..	118,586	0.33	8,976	3.9	36,342	39,758	670	16.8	17.8	28	41.8	405	10.1	11.4	0.20	0.27
SHIRE HALL ..	1	—	1	4.0	4	2	—	—	—	—	—	—	—	—	—	—
TOTALS ..	438,838	0.36	33,907	3.9	135,714	158,670	2,561	16.1	16.7	80	31.2	1,610	10.1	10.4	0.20	0.27

*The figures under this heading relate to the population enumerated on the 26th April, 1931, but the Districts for which they are now given are as constituted at the 30th September, 1935, and include changes of area under the County of Nottingham Review Order, 1934, which came into effect on the 1st April, 1935 and the Nottingham Corporation Act, 1932, which came into effect on the 1st April, 1933.

TABLE III.

NOTTINGHAMSHIRE.

Vital Statistics for the Year 1950.

WHOLE ADMINISTRATIVE COUNTY.

	Area in Acres (Land and Inland Water)	Persons per Acre	Families or Separate Occupiers at Census 1931	Persons per Family at Census 1931	*Population, Census 1931	Population estimated to the middle of 1950	Births			Deaths under 1 year		Deaths			Death Rate from Pulmonary Tuberculosis per 1,000 of population	Death Rate from All Tuberculous Diseases per 1,000 of population
							Number	Rate (Crude)	Rate (Corrected)	Number	Rate per 1,000 Live Births	Number	Rate (Crude)	Rate (Corrected)		
URBAN DISTRICTS ..	85,005	4.4	75,767	3.9	300,828	375,200	6,122	16.3	16.3	220	35.9	3,961	10.5	11.5	0.32	0.35
RURAL DISTRICTS ..	43,838 ⁸ ₄	0.36	33,907	3.9	135,714	158,670	2,561	16.1	16.7	80	31.2	1,610	10.1	10.4	0.20	0.27
WHOLE ADMINISTRATIVE COUNTY	523,843	1.01	109,674	3.9	436,542	533,870	8,683	16.3	16.5	300	34.5	5,571	10.4	11.3	0.31	0.35

*Adjusted figures which relate to the area of the County as constituted at the 30th September, 1935, and exclude the population enumerated in the area transferred to the City of Nottingham under the Nottingham Corporation Act, 1932, which came into effect on the 1st April, 1933.

TABLE IV.

NOTTINGHAMSHIRE.

Abstract of Vital Statistics.

Year	Estimated Population at the <i>middle</i> of the year	Excess of Births over Deaths	Persons per Acre	Separate Families	Persons per Family	Registered Births	Births per 1,000 of the population	Deaths under 1 year per 1,000 Births	Net Deaths	Net Death Rate per 1,000 of the Population
1901	275,971	4497	·53	59,755	4·6	8636	31·3	145	4139	14·9
1902	282,563	4804	·54	..	..	8920	31·5	138	4116	14·5
1903	289,001	4926	·55	..	..	9072	31·3	134	4146	14·3
1904	295,586	5086	·56	..	..	9379	31·7	139	4293	14·5
1905	302,321	4389	·57	..	..	8880	29·3	126	4491	14·8
1906	309,209	4849	·59	..	..	9088	29·3	121	4239	13·7
1907	316,355	4412	·60	..	..	8962	28·3	127	4550	14·3
1908	323,461	5358	·62	..	..	9818	30·3	119	4460	13·7
1909	330,831	5316	·63	..	..	9740	29·4	106	4424	13·3
1910	338,937	5223	·64	..	..	9554	28·2	110	4331	12·7
1911	345,930	4903	·66	76,236	4·5	9453	27·3	125	4550	13·1
1912	355,046	5007	·68	..	..	9213	25·9	93	4206	11·8
1913	362,307	4934	·69	..	..	9369	25·8	101	4435	12·2
1914	367,617	4845	·70	..	..	9541	25·9	107	4696	12·7
1915	353,193	3775	·67	..	..	8843	25·0	112	5068	14·3
1916	344,501	4126	·66	..	..	8567	22·8	95	4441	12·8
1917	344,822	3372	·66	..	..	7589	19·7	95	4217	12·2
1918	339,456	1725	·65	..	..	7742	20·3	100	6017	17·7
1919	366,331	2948	·70	..	..	7507	19·6	95	4559	12·4
1920	380,928	5667	·73	..	..	9836	25·8	85	4169	10·9
1921	381,969	4774	·73	85,646	4·4	9187	24·1	86	4413	11·5
1922	386,130	4177	·74	..	..	8316	21·5	69	4139	10·7
1923	388,019	3763	·74	..	..	8023	20·6	77	4260	11·0
1924	391,700	3715	·75	..	..	8085	20·6	79	4370	11·2
1925	393,400	3373	·75	..	..	7921	20·1	77	4548	11·6
1926	398,900	3310	·75	..	..	7739	19·4	73	4429	11·1
1927	408,100	2984	·78	..	..	7613	18·6	69	4629	11·3
1928	422,700	3549	·81	..	..	7941	18·8	64	4392	10·4
1929	429,300	2242	·82	..	..	7517	17·5	76	5095	11·8
1930	439,400	3261	·84	..	..	7746	17·6	62	4485	10·2
1931	447,900	2617	·86	*109,674	3·9	7695	17·2	72	5078	11·3
1932	451,600	2821	·86	..	..	7534	16·7	66	4713	10·4
1933	444,970	2036	·86	..	..	6945	15·5	68	4909	10·9
1934	448,500	2395	·87	..	..	7042	15·7	54	4647	10·4
1935	453,500	2382	·86	..	..	7083	15·6	56	4701	10·4
1936	459,000	2005	·88	..	..	7033	15·3	58	5028	10·9
1937	465,800	2218	·89	..	..	7318	15·7	59	5100	10·9
1938	470,900	2796	·90	..	..	7549	16·0	46	4753	10·1
1939	^a 478,200 ^b 479,900	2511	·91	..	..	7847	16·4	51	5336	11·1
1940	483,240	1735	·92	..	..	7610	15·7	58	5875	12·2
1941	492,750	2501	·94	..	..	7954	16·1	62	5453	11·1
1942	481,200	3755	·92	..	..	8659	18·0	48	4904	10·2
1943	472,300	3946	·90	..	..	9255	20·2	47	5309	11·2
1944	474,960	5125	·91	..	..	10,343	21·8	47	5218	11·0
1945	475,910	4068	·91	..	..	9096	19·1	44	5028	10·5
1946	495,620	4693	·95	..	..	10,001	20·2	41	5308	10·7
1947	505,690	5114	·97	..	..	10,673	21·2	41	5559	11·0
1948	518,300	4483	·99	..	..	9486	18·3	42	5003	9·65
1949	523,160	3562	·99	..	..	9098	17·4	32	5536	10·6
1950	533,870	3114	1·70	..	..	8683	16·3	34	5571	10·4
For Comparison—										
1950	England and Wales	..	..	..	..	..	15·8	29·8	..	11·6
	126 County Boroughs and Great Towns including London	..	..	..	..	..	17·6	33·8	..	12·3
	148 Smaller Towns	..	..	..	..	..	16·7	29·4	..	11·6
	LONDON (Administrative County)	..	..	..	..	..	17·8	26·3	..	11·8

*Adjusted figures owing to alteration in area under the Nottingham Corporation Act, 1932, as from the 1st April, 1933.

^a Population figures for calculation of Birth rates.

^b Population figures for calculation of Death rates and incidence of notifiable diseases.

TABLE V.

NOTTINGHAMSHIRE.

INFANTILE MORTALITY, 1950.

DISTRICT	No. OF LIVE BIRTHS	DEATHS UNDER ONE YEAR OF AGE		DEATHS UNDER ONE MONTH	
		Total No.	Rate per 1,000 Live Births	No.	Rate per 1,000 Live Births
MANSFIELD (Borough) ..	834	29	34.8	22	26.38
WORKSOP (Borough) ..	575	21	36.5	14	24.34
NEWARK (Borough) ..	408	15	36.8	12	29.41
EAST RETFORD (Borough)	272	9	33.1	6	22.05
ARNOLD	318	10	31.4	7	22.01
BEESTON & STAPLEFORD	790	19	24.0	9	11.39
CARLTON	508	19	37.4	14	27.55
EASTWOOD	181	5	27.6	2	11.04
HUCKNALL	369	14	37.9	9	24.38
KIRKBY-IN-ASHFIELD ..	364	14	38.4	4	10.98
MANSFIELD W'HOUSE ..	318	17	53.4	9	28.30
SUTTON-IN-ASHFIELD ..	667	34	50.9	22	32.98
WARSOP	200	7	35.0	1	5.0
WEST BRIDGFORD ..	318	7	22.0	5	15.72
URBAN DISTRICTS ..	6,122	220	35.9	136	22.21
BASFORD	830	26	31.3	16	19.27
BINGHAM	278	6	21.6	2	7.19
WORKSOP	295	5	16.9	—	—
EAST RETFORD	314	8	25.5	6	19.10
NEWARK	174	7	40.2	5	28.73
SOUTHWELL	670	28	41.8	14	20.89
RURAL DISTRICTS ..	2,561	80	31.2	43	16.74
WHOLE COUNTY ..	8,683	300	34.5	179	20.61

TABLE VI.

**Causes of Death at Different Periods of Life in the Administrative
County of Nottingham, 1950.**

No.	CAUSES OF DEATH	SEX	AGGREGATE OF URBAN DISTRICTS							AGGREGATE OF RURAL DISTRICTS							Total for Co'ty
			All Ages	0—	1—	5—	15—	45—	65—	All Ages	0—	1—	5—	15—	45—	65—	
	ALL CAUSES	M	2109	132	21	22	175	541	1218	847	43	8	8	61	210	517	2956
		F	1852	88	13	15	155	378	1203	763	37	8	5	67	136	510	2615
1	Tuberculosis Respiratory	M	71	..	..	..	33	26	12	18	..	..	..	12	5	1	89
		F	50	..	..	..	41	6	3	25	..	..	..	20	3	2	75
2	Do. Other	M	9	..	1	..	7	1	..	1	..	..	..	1	..	..	10
		F	5	..	3	1	1	..	..	6	..	2	..	3	1	..	11
3	Syphilitic Disease	M	9	..	..	..	..	7	2	1	..	..	..	..	1	..	10
		F	1	..	..	..	..	..	1	..	..	..	..	..	..	..	1
4	Diphtheria	M	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		F	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5	Whooping Cough	M	4	4	..	..	..	..	..	1	1	..	..	..	..	..	5
		F	3	2	1	..	..	..	..	..	..	..	..	..	..	..	3
6	Meningococcal Infections	M	1	1	..	..	..	..	..	..	..	..	..	..	..	..	1
		F	..	..	..	..	..	..	..	2	1	..	..	..	..	..	1
7	Acute Poliomyelitis	M	..	..	..	..	..	..	..	..	..	1	..	..	..	..	2
		F	1	..	..	1	..	..	..	2	..	..	2	..	..	..	3
8	Measles	M	..	..	..	..	..	..	..	1	..	..	1	..	..	..	1
		F	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
9	Other Infective and Parasitic Diseases	M	6	..	1	1	1	1	2	3	1	..	..	..	..	2	9
		F	6	2	..	..	2	..	2	5	..	1	..	3	..	1	11
10	Malignant Neoplasm— Stomach	M	69	..	..	..	6	29	34	32	..	..	..	..	13	19	101
		F	46	..	..	..	..	12	34	17	..	..	..	1	5	11	63
11	Do. Lung, Bronchus	M	85	..	..	..	11	42	32	26	..	..	..	2	18	6	111
		F	15	..	..	..	3	7	5	6	..	..	..	..	5	1	21
12	Do. Breast	M	2	..	..	..	..	1	1	..	..	..	..	..	..	..	2
		F	56	..	..	..	4	30	22	21	..	..	..	6	10	5	77
13	Do. Uterus	M	..	..	..	..	3	23	15	12	..	..	..	3	5	4	53
		F	41	..	..	..	..	..	..	..	..	..	..	..	..	..	..
14	Other Malignant and Lymphatic Neoplasm	M	193	..	..	3	9	61	120	71	..	..	..	5	22	44	264
		F	165	..	..	..	18	66	81	59	..	..	..	5	17	37	224
15	Leukaemia, Aleukaemia	M	2	..	..	..	1	..	1	6	..	1	1	..	2	2	8
		F	5	..	..	1	1	..	3	3	..	..	..	2	1	..	8
16	Diabetes	M	4	..	..	..	..	..	4	2	..	..	..	..	1	1	6
		F	23	..	..	..	3	5	15	12	..	..	..	1	3	8	35
17	Vascular Lesions of Nervous System	M	230	..	..	..	4	43	183	92	..	..	..	2	14	76	322
		F	273	..	..	..	8	43	222	107	..	..	..	1	14	92	380
18	Coronary Disease	M	273	..	..	..	5	115	153	91	..	..	..	3	31	57	364
		F	141	..	..	..	..	37	104	55	..	..	..	..	10	45	196
19	Hypertension	M	62	..	..	..	1	12	49	30	..	..	..	..	9	21	92
		F	46	..	..	..	..	13	33	18	..	..	..	..	2	16	64
20	Other Heart Disease	M	290	..	1	1	15	48	225	131	..	..	..	..	15	114	421
		F	365	..	..	..	19	37	309	182	..	..	..	5	21	156	547
21	Other Circulatory Disease	M	75	..	..	..	4	18	53	38	..	..	..	1	7	30	113
		F	57	..	..	..	3	7	47	20	..	..	..	..	7	13	77
22	Influenza	M	20	..	1	..	4	4	11	12	1	..	..	1	3	7	32
		F	9	..	..	..	..	2	7	7	..	..	..	1	..	6	16
23	Pneumonia	M	75	17	6	2	5	13	32	23	5	2	..	2	3	11	98
		F	78	11	4	..	2	10	51	36	6	3	..	4	5	18	114
24	Bronchitis	M	181	3	2	..	2	44	130	57	3	..	..	2	10	42	238
		F	106	4	..	..	2	16	84	40	2	..	..	1	..	37	146
25	Other Diseases of Respiratory System	M	15	..	..	..	3	5	7	12	..	1	..	3	2	6	27
		F	19	1	..	2	4	2	10	4	..	..	1	1	2	..	23
26	Ulcer of Stomach and Duodenum	M	25	..	..	..	3	8	14	11	..	..	..	..	6	5	36
		F	8	..	..	..	1	4	3	4	..	..	..	..	3	1	12
27	Gastritis, Enteritis and Diarrhoea	M	12	6	1	..	..	1	5	2	1	..	..	..	..	1	14
		F	11	7	..	..	1	..	2	3	1	..	..	..	1	1	14
28	Nephritis and Nephrosis	M	30	..	..	1	7	6	16	16	..	1	1	1	7	6	46
		F	24	..	1	2	5	6	10	11	..	1	..	2	3	5	35
29	Hyperplasia of Prostate	M	27	..	..	..	..	2	25	14	..	..	..	..	..	14	41
		F	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
30	Pregnancy, Childbirth, Abortion	F	7	..	..	..	7	..	..	5	..	..	..	4	1	..	12
31	Congenital Malformations	M	25	19	2	..	2	..	..	9	4	..	..	1	3	..	34
		F	19	16	..	1	..	1	1	7	5	..	..	1	1	..	26
32	Other Defined and ill- defined Diseases	M	218	77	..	7	23	22	88	89	26	..	1	5	19	38	307
		F	214	43	3	4	18	38	108	79	18	..	2	3	15	41	293
33	Motor Vehicle Accidents	M	24	..	2	4	7	7	4	15	..	..	2	5	6	2	39
		F	7	..	..	2	3	1	1	1	..	1	..	..	..	..	8
34	All Other Accidents	M	45	5	3	1	16	12	8	32	1	2	1	11	7	10	77
		F	35	2	1	1	2	4	25	13	4	..	..	..	1	8	48
35	Suicide	M	26	..	..	..	6	13	7	7	..	..	..	1	4	2	33
		F	15	..	..	..	4	7	4	2	..	..	..	..	..	2	17
36	Homicide and Operations of War	M	1	..	..	..	..	1	..	2	..	..	..	..	..	..	3
		F	1	..	..	..	..	..	1	..	..	..	..	..	..	..	1

TABLE VII.

SANITARY INSPECTION OF THE AREA, 1950.

vii.

DISTRICT. (1)	No. of complaints received or registered. (2)	Total No. of inspections made. (3)	No. of nuisances and defects dealt with. (4)	No Notices served.		No. of Notices complied with.		No. of Re-inspec- tions or re-visits included in Column (3). (9)	REMARKS. (10)
				Informal. (5)	Statutory. (6)	Informal. (7)	Statutory. (8)		
Urban Districts—									
Mansfield B.	1,295	6,136	2,943	1,326	229	1,632	345	4,810	
Worksop B.	230	5,586	592	235	47	125	26	932	
Newark B.	736	814	186	174	7	147	3	368	
East Retford B.	92	2,554	399	170	26	143	30	432	
Arnold	652	5,094	914	661	64	591	148	1,545	
Beeston and Stapleford	1,502	8,537	2,174	1,348	78	1,361	76	2,306	
Carlton	1,173	8,298	1,675	648	225	673	251	2,061	
Eastwood	79	1,189	231	148	28	125	14	—	
Hucknall	876	3,104	1,079	888	385	547	457	2,025	
Kirkby-in-Ashfield	983	2,747	1,302	464	261	326	116	1,158	
Mansfield Woodhouse	281	3,187	1,417	390	112	748	108	1,654	
Sutton-in-Ashfield	1,437	2,831	1,715	631	124	103	18	291	
Warsop	155	2,641	161	142	24	197	18	391	
West Bridgford	354	2,122	354	219	30	197	18	1,100	
Rural Districts—									
Basford	497	6,570	1,394	808	83	845	61	4,244	
Bingham	197	3,957	340	224	21	202	20	1,233	
Worksop	43	1,614	89	51	38	48	30	423	
East Retford	91	3,524	116	100	16	98	14	587	
Newark	38	257	87	47	—	42	—	103	
Southwell	265	6,206	630	74	18	81	12	630	

TABLE VIII. HOUSING STATISTICS, 1950.

	Mansfield B.	Workshop B.	Newark B.	E. Retford B.	Arnold U.D.	Beeston and Stapleford U.D.	Carlton U.D.	Eastwood U.D.	Hucknall U.D.	Kirkby-in-Ashfield U.D.	Mansfield Woodhouse U.D.	Sutton-in-Ashfield U.D.	Warsop U.D.	West Bridgford U.D.	Basford R.D.	Bingham R.D.	Workshop R.D.	E. Retford R.D.	Newark R.D.	Southwell R.D.
1. Inspection of Dwelling-houses during the year :—																				
(1) (a) Total number of dwelling-houses inspected for housing defects (under P.H. or Housing Acts)	1090	427	757	281	1299	1781	955	79	1004	460	643	1020	166	104	1870	1272	161	1194	117	878
(b) Number of Inspections made for the purpose	4810	810	814	312	2958	3560	2016	237	3029	1644	1026	1669	295	178	4244	1560	253	1473	131	1433
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing (Consolidated) Regulations, 1925	—	—	—	4	—	2	—	—	15	—	13	—	—	—	—	—	—	878	—	—
(b) Number of Inspections made for the purpose	—	—	—	7	—	2	—	—	20	—	24	—	—	—	—	—	—	878	—	—
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	—	35	10	4	—	—	—	2	6	5	1	58	—	—	31	12	2	275	—	4
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	1090	392	174	172	661	821	614	77	727	455	363	962	—	104	786	522	53	443	35	92
2. Remedy of Defects during the year without Service of formal Notices :—																				
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	1350	183	147	146	591	834	536	63	468	286	331	748	99	98	680	207	49	37	42	81
3. Action under Statutory Powers during the year :—																				
A.—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :—																				
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	107	—	—	—	—	62	115	1	3	2	11	—	—	7	21	6	—	—	—	—
(2) Number of dwelling-houses which were rendered fit after service of formal notices :																				
(a) By owners	90	—	—	—	—	57	107	1	64	2	16	—	—	2	25	5	—	—	—	—
(b) By Local Authority in default of owners	17	—	—	—	—	8	28	—	14	—	2	—	—	1	—	1	—	—	—	—

B.—Proceedings under Public Health Acts :—
 (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied
 (2) Number of dwelling-houses in which defects were remedied after service of formal notices
 (a) By owners
 (b) By Local Authority in default of owners

C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—

(1) Number of dwelling-houses in respect of which Demolition Orders were made
 (2) Number of dwelling-houses demolished in pursuance of Demolition Orders

D.—Proceedings under Section 12 of the Housing Act, 1936 :—

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made
 (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit

4. Housing Act, 1936—Part IV.—Overcrowding :—

(a) (i) Number of dwellings overcrowded at the end of the year
 (ii) Number of families dwelling therein
 (iii) Number of persons dwelling therein
 (b) Number of new cases of overcrowding reported during the year
 (c) (i) Number of cases of overcrowding relieved during the year
 (ii) Number of persons concerned in such cases
 (d) Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding
 (e) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report

5. Number of new houses erected during the year

81	47	7	44	64	16	132	-	279	139	101	124	-	23	63	19	-	16	-	18
175	26	3	47	44	10	78	-	257	127	88	107	18	3	36	12	-	14	-	12
23	-	-	-	104	1	36	-	24	6	9	1	-	12	13	7	-	-	-	-
-	16	10	2	-	9	-	2	5	5	-	38	-	-	6	4	3	8	-	-
1	7	-	3	-	6	-	-	4	5	-	6	-	-	†35	5	2	9	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-
*	*	*	3	*	*	14	-	116	*	*	28	-	*	38	*	13	20	*	-
*	*	*	4	*	*	27	-	214	*	*	56	-	*	56	*	18	20	*	-
*	*	*	31	*	*	121	-	748	*	*	264	-	*	291	*	124	143	*	-
*	*	*	9	*	*	5	1	44	-	*	1	-	*	13	-	5	-	*	-
*	*	*	9	*	*	7	6	16	*	*	2	-	*	11	*	6	-	*	-
*	*	*	70	*	*	71	23	89	*	*	20	-	*	70	*	64	-	*	-
*	*	*	-	*	*	-	-	2	*	*	-	-	*	1	*	-	-	*	-
241	171	300	57	135	248	133	72	154	106	75	195	42	151	164	89	138	97	28	238

*No statistics available.

‡Including 2 from notices served in 1949.

†Includes 27 houses demolished in pursuance of Clearance Orders.

